

**A PROJECT
ON
COMMUNITY SERVICE**

**Submitted in the partial fulfillment of the requirements for the award of
degree of BSc**

**By
Gudivada chanti
2222001049031**

**Semester 2 (BZC)
batch 2022-2025**

Under the supervision

D.Adinarayana

Lecturer in Chemistry

GOVERNMENT DEGREE COLLEGE(Men), SRIKAKULAM



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ACKNOWLEDGEMENT

I would like to express my gratitude to all those who gave me the possibility to complete this Community Service Project. Special thanks to Mentor D.Adhinarayana sir who help me in stimulating suggestions and encouragement to complete this project.

I would like to thank all the staff from the department of chemistry for their able guidance and support to complete this project

I would also like to express my gratitude to our principal madam for her tremendous support to complete this project.

CERTIFICATE

I certified that Gudivada.chanti studying Bsc Cbz group has completed and submitted the project report on "FOOD HABITS" further partial fulfillment of the requirements for the award of Bachelor of science under my supervision during the academic year 2022-2025

Date:

Place: kondraguda



project guide
D. Adhinarayana
Lecture in chemistry
GDC (M), srikakulam

DECLARATION

I hereby declare that the Community Service Project report entitled "FOOD HABITS" submitted by me to the Govt. Degree College (M), srikakulam in partial fulfillment of the requirement for the award of the degree of Bsc Cbz is a record of bonified project work carried out by me under the guidance of D. Adhinarayana sir. I further declare that the work reported in this project has not been submitted and will not be submitted either in part or in full, for the award of any other degree in this institute or other institute or University.

Srikakulam
Date:

Signature of the candidate
Name: G. Chaitu

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INTRODUCTION

Food habits and Nutritional Problems:

Food is essential for all humans for survival. Food Habits and imbalanced intake of diet by an individual results in the malnutrition or cause of many health problems. Especially women, children and pregnant women must be always cautious to take proper food intake with essential nutrients. Because poor diet and disease are caused by food insecurity. Sometimes causing diarrhoea and other illness.

There is a saying 'you are what you eat' seems to be proven true. It is important to know what food to eat in order to stay healthy. Health depends to a large extent on Nutrition and Nutrition on food we take. Hence Nutrition and Health are two sides of the same coin and food is the most important factor for health and fitness.

Healthy Food Habits:

Healthy Food habits includes a variety of foods in adequate amounts and correct proportions to meet the requirements of all essential nutrients such as proteins, carbohydrates, fats, vitamins, minerals, water and fibre. This also includes proper Schedule for the intake of light and heavy foods, when to take and when not to take, health condition of the individual. For example person who is suffering from kidney stones should not often take calcium rich foods. We have to take foods that suits our age and health. The most common eating idiosyncrasies include skipping meals, consuming fast foods in a routine way, avoiding fruits, and vegetables, frequent snacking. Hence it is essential for each and every individual to adopt proper food habits.

OBJECTIVE

The aim and objective of this project is to find out in a closed community about the following food habits and to analyse whether they are adopted to healthy food habits and if not to incorporate sound eating habits by creating awareness in them to recognise good eating habits followed with regular exercise.

- *About the type of foods most people are interested to take.*
- *Food intake in regular Time intervals.*
- *Main meal in view of the majority of the people.*
- *Whether interested to take fresh food or cooked & preserved food.*
- *Taking fresh fruits and vegetables.*
- *Sweets /junk foods.*
- *Whether drinking sufficient quantity of water.*
- *Regular weight check up.*
- *Monitoring individual food behaviour.*
- *Any form of eating disorders.*
- *Effect of socio-economic status on food habits.*

METHODOLOGY

1. Study site :

The place selected for the project was comes under 8th ward kanimetta village,ponduru mandal and srikakulam district. Approximately 30 families were covered under this ward. This is a rural area with 75% of people were farmers. This area is used for the cultivation of rice and vegetables

2. Quantitative study :

The quantitative study of my project includes about the number of children, youngsters,elder women and men, pregnant women, people with physical and mental ailments, their food intake based on quantity per day and their food habits.

3. Qualitative study:

The qualitative study was carried out based on their cultural pattern of food habits among various socio-economic, educational and age grou

4. Data Collection :

Initially socio-economic survey and other background survey was done and the data was collected from them.

Secondly their food habits data was collected from the initially prepared questionnaire which consists of 14 questions to know about their food habits, cooking methods, storage food,time intervals followed,and how much expenditure was spent on food,in detail.

PROJECT REPORT

I am Gudivada.Chanti in studying in 1 B.Sc My project is on 'FOODHABITS' that which types food sand how many ways to take food and what may be the advantages and disadvantages with food. I got a survey in my village, Kondraguda, Srikakulam mandal Srikakulam district.

In our survey Maximum of people would like to take food for three times per day on morning, afternoon and night time. For morning time the food is breakfast and for after noon is lunch and night is dinner. Mainly the major criteria of food taking on afternoon time as so many would like to do works which need energy.

AWARENESS REPORT:

PROBLEMS IDENTIFIED

- * Uneven roads in every street
- * Water problems in every Street
- * Improper drainage system

EFFECTS FACED BY PEOPLE

- * Because of having uneven roads there are so many vehicles are damaged, not only that but also oldaged people are getting hard to walk on these roads.
- * There is a need of water to everyone but in our village there are no proper gov. tap connection to each house but some are having them. Mostly people in my ward are not having gov. tap connection.
- * There are so many problems are taking place on having improper drainage system.

SUGGESTIONS

At first, I would like to explain all about those problems and I said to them as you should complaint to the Valenteer to clear these problems and the valenteer said that all those problems will be cleared by our sarpanch and secretary. I told them that we have to maintain a proper usage of them neatly.

BY :

OBSERVATIONS

Food habits Survey

S.No	Group of Individuals	Main Findings	Remarks/suggestions
1	Women/ pregnant women	Middle aged women /pregnant women preferred to have as per their health conditions. Some from economically poor status are taking porridge as main breakfast also fermented curd rice was included. Preferred vegetable soups in the middle and for lunch they are likely to take rice fresh vegetables, non-vegetarian food, curd. They are seen having early evening food to avoid digestion problems.	Suggested to increase time intervals of food intake with less quantity each time. Following medication as per the Schedule and also see that they have good rest during the day and not to push themselves much and to involve in meditation.
2	Young women	They preferred to take boiled eggs, Milk, porridge, vegetable soups for breakfast, dal, fresh vegetables, non-vegetarian food items in lunch, fresh fruit juices in their daily intake.	Suggested to take more Jaggery food items, also they are advised to take iron tonics in case of fatigue and anaemia also to take multi-vitamin syrups.
3	Young boys	It is observed that they prefer to take spicy junk and fast foods atleast 4 times a week and interested to take lunch as main meal with	Suggested to take porridge and liquid diet, to avoid processed foods to

		vegetables, dal, pickle and curd followed with fresh fruits. They prefer doing exercise, also interested in sports and games for physical fitness.	maintain balanced weight.
4	Men	Middle aged men preferred south Indian tiffins like Idli, Dosa, boiled eggs and less rice quantity for lunch, more roti's like diet fruits, fresh vegetables, butter milk and limited quantities of Non-vegetarian items.	Suggested for their age group exercise, walking and to take more balanced diet.
5	Elderly people	Preferred liquid diet and ragi porridge, boiled eggs for breakfast, roti's, fresh fruits, boiled vegetables and ragi porridge	Suggested to take less quantities of meal and to increase number of time intervals as with age they might develop stomach related problems.
6	Individuals with health issues	They told that they are taking food as per the advice of the Doctors.	Suggested to take a proper food items and to maintain a proper balance

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : G. Chaitu

Group : CB2- B SECTION

Registration Number : 2222001049031

Name of the Mentor : D. Adinarayana

Name of the Project : Socio - Economic Survey

Date & Day	Activity done	Number of Hours Spent	Signature of the student
9.5.2023	Socio - Economic Survey	2 hours	G. Chaitu
10.5.2023	Socio - Economic Survey	1 hour	G. Chaitu
11.5.2023	Socio - Economic Survey	1 hour	G. Chaitu
12.5.2023	Socio - Economic Survey	2 hour	G. Chaitu
13.5.2023	Socio - Economic Survey	1 hour	G. Chaitu
14.5.2023	Socio - Economic Survey	2 hour	G. Chaitu
15.5.2023	Socio - Economic Survey	1 hour	G. Chaitu
16.5.2023	Socio - Economic Survey	2 hours	G. Chaitu
17			


Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : G. Chaiti
 Group : B2C B - SECTION
 Registration Number : 2222001049031
 Name of the Mentor : D. Adinarayana
 Name of the Project : Awareness programme

Date & Day	Activity done	Number of Hours Spent	Signature of the student
17.5.2023	Awareness programme	2 hours	G. Chaiti
18.5.2023	Awareness programme	2 hours	G. Chaiti
19.5.2023	Awareness programme	2 hours	G. Chaiti


 Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : G. Chanti
 Group : CBS2- B-SECTION
 Registration Number : 2222001049031
 Name of the Mentor : S. Adinarayana
 Name of the Project : Food habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
20.5.23	food habits	1 hour	G. Chanti
21.5.23	food habits	1 hour	G. Chanti
22.5.23	food habits	2 hour	G. Chanti
23.5.23	food habits	1 hour	G. Chanti
24.5.23	food habits	3 hour	G. Chanti
25.5.23	food habits	2 hour	G. Chanti
26.5.23	food habits	1 hour	G. Chanti
27.5.23	food habits	3 hour	G. Chanti
28.5.23	food habits	1 hour	G. Chanti


 Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : G. Chaitu

Group : B2C - B-SECTION

Registration Number : 2222001049031

Name of the Mentor : G. Adinarayana

Name of the Project : Food habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
29.5.23	project working	1 hour	G. Chaitu
30.5.2023	project working	1/2 hour	G. Chaitu
31.5.23	project working	2 hour	G. Chaitu
1.6.23	project working	1 hour	G. Chaitu
2.6.23	project working	2 hour	G. Chaitu
3.6.23	project working	1 hour	G. Chaitu
4.6.23	project working	2 hours	G. Chaitu
5.6.2023	project working	2 hours	G. Chaitu
6.6.23	project working	1 hour	G. Chaitu
7.6.23	project working	@ 1/2 hour	G. Chaitu


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY CONSOLIDATION REPORT

Name of the student : G. Chaiti
Group : CB2- B-SECTION
Name of the Mentor : D. Adinarayana
Name of the Project : project working

Ward/ Habitat	Kondhaguda	Panchayat	Chiguruvulasa	Post Office	Chiguruvulasa
Mandal	Sarabussili	District	Srikakulam	Pin Code	532190

1. Total Number of Houses in the Habitat/Ward: 1

2. Number of Houses Caste-wise:

SC ST OC BC-A BC-B BC-C BC-D

3. Common Health problems in the Habitat/Ward:

- Body pains
- Fever, Diabetes etc.
- cold, cough

4. Number of White Ration Cards: 25

5. Number of Illiterates in the Ward/ Habitat/ Village: 13

6. Number of Graduates in the Ward/ Habitat/ Village: 16

7. Number of Job Holders: 05

8. Number of PWD People: -

9. Number of DWACRA Groups in the Ward/ Habitat/ Village: 03

10. Road connectivity to the Ward/ Habitat/ Village: Yes / No

11. Bus facility available: Yes / No

12. Problems identified in the Ward/ Habitat/ Village:

- Dringe problem
- health care centre
- water facility
- power facility


Signature of the Mentor


Signature of the Student



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chanti
Group : CB2 (B)
Registration Number : 2222 0010 490 31
Area of the Survey conducted: Kondragude

House No.	3-131	Habitat /Ward		Panchayat /Municipality	Chigurvalasa
Post office	Chigurvalasa	Mandal	Sambujjili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Shiva Kumar	M	41	Tenth	Agriculture Labour	Daily wage
2.	G. Purna	F	40	9th	Housewife	Daily wage

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: male (iii) Religion: (Christian)

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 9 Acres

(vi) Livestock resources: Cows 1 Oxen 1 Buffaloes 1 Sheep/Goats 2

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 7702474353

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

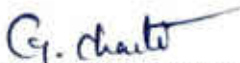
(i) current problems

(ii)

(iii)

Place:

Date:


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chanti
Group : CB2 B
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	2-122	Habitat /Ward		Panchayat /Municipality	Chiguvalesa
Post office	Chiguvalesa	Mandal	Sarabujili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Ani	M	24	15th	Agriculture	Wage
2.	G. Suresh	M	31	P.G.	Employment	monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: cristian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection ✓

(iv) Availability of Agriculture land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

(vi) Livestock resources: Cows — Oxen — Buffaloes — Sheep/Goats —

(vii) Do you have own toilet? Yes/No

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Allments in family:

(ii) Treatment in which Hospital: Govt/Private

(iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 8897217145

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chauti
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chant

Group : CBZ- (B)

Registration Number : 2222001049031

Area of the Survey conducted: Kondraguda

House No.	2-126	Habitat /Ward		Panchayat /Municipality	Chiguruvalesa
Post office	Chiguruvalesa	Mandal	Sankupili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Balabhisna	M	32	inter	Agriculture	daily wage
	G. Hanibabu	M	30	inter	painter	Daily

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/OC (ii) Sub-Caste: mala (iii) Religion: christian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

(vi) Livestock resources: Cows Oxen Buffaloes Sheep/Goats

(vii) Do you have own toilet? Yes/No

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

(iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9848046342

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chait^o
Group : CB2- (B)
Name of the mentor :
Name of the project :

House No	Name of the person	Village / Ward	Mandal	District
6-124	G. mahesh	Kondragada	Sarabujili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO
11. Do you know your current body mass index?

yes
12. Have your ever been on a diet, if so, what kind?

NO
13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep
a. No impact. B. little impact c. big impact. D. none

Health
a. No impact. B. little impact c. big impact. D. none

Weight.
a. No impact. B. little impact c. big impact. D. none

Mental condition.
 A. No impact. B. little impact c. big impact. D. none

G. Chhab
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaiti
Group : CB2 (B)
Registration Number : 2222 00104903
Area of the Survey conducted: Kondra guda

House No.	2-168	Habitat /Ward		Panchayat /Municipality	Chiguvulasa
Post office	Chiguvulasa	Mandal	Sandurpiti	District	Srikulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Ramesh	M	21	Degree	company employed	Monthly
2.	G. Adilaxmi	F	40	5th	Agriculture	Daily wage

2. Social Status details:

(i) Community: ~~SC~~/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: cristian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows ___ Oxen ___ Buffaloes ___ Sheep/Goats ___

(vii) Do you have own toilet? Yes/No

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

(iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9910744751

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chaiti
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaitra
Group : CB2 - (B)
Registration Number : 2222 001049031
Area of the Survey conducted: Kondraguda

House No.	2-27	Habitat /Ward		Panchayat /Municipality	Chiguruvalese
Post office	Chiguruvalese	Mandal	Sambajjiti	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Ramarao	M	50	inter	chef	monthly
2.	G. Ruppamma	F	39	10th	housewife	daily wage

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: christian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: Acres

(vi) Livestock resources: Cows Oxen Buffaloes Sheep/Goats

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 89 9126 8476

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaiti
Group : C B2- (B)
Registration Number : 2222 001049031
Area of the Survey conducted: Kondraguda

House No.	G. Chaiti 1-126	Habitat /Ward		Panchayat /Municipality	Chiguruvallasa
Post office	Chiguruvallasa	Mandal	Sarabussili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	B. Rambabu	M	34	ITI	company	monthly
2.	B. Naveen	M	28	B.tech	software	monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows ___ Oxen ___ Buffaloes ___ Sheep/Goats ___

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability
	①			

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 8712379542

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chaiti
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chant^o
Group : CB2 - B
Registration Number : 2222 0010 49031
Area of the Survey conducted: Kondraguda

House No.	2-12B	Habitat /Ward		Panchayat /Municipality	Chiguruvallasa
Post office	Chiguruvallasa	Mandal	Sambasuli	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession & Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Ratna	W/F	40	uneducated	Agriculture	Daily wage
2.	G. Shankar	W/M	45	iti	employee	monthly

2. Social Status details:

(i) Community: SC/ ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: male (iii) Religion: christian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows — Oxen — Buffaloes — Sheep/Goats

- (vii) Do you have own toilet? Yes/No ✓
- (viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓
- (ix) Do you have white Ration Card? Yes/No ✓
- (x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

- (i) Ailments in family:
- (ii) Treatment in which Hospital: Govt/Private ✓
- (iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

- (iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

- (i) Do You have TV: Yes/No ✓
- (ii) Do you have Mobile: Yes ✓
- (iii) Mobile Number: 9246112602
- (iv) Do you have Computer/Laptop: Yes/No ✓
- (v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

- (i)
- (ii)
- (iii)

Place:

Date:


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chant^a
Group : CB2 (B)
Registration Number : 2222001049031
Area of the Survey conducted: Kondruda

House No.	6-139	Habitat /Ward		Panchayat /Municipality	Chiguruvalea
Post office	Chiguruvalea	Mandal	Sarabujjili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	K. Vasu	24	M	inter	Auto driver	Daily wage
2.	K. Adilaxmi	49	F	uneducated	Agriculture	Daily wage

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: cristian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows Oxen Buffaloes Sheep/Goats

(vii) Do you have own toilet? Yes/No

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

(iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9648970018

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chait
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chanti

Group : CB2 - B

Registration Number : 222200104031

Area of the Survey conducted: Kondraguda

House No.	3-128	Habitat /Ward		Panchayat /Municipality	Chiguruvalsa
Post office	Chiguruvalsa	Mandal	Sarabysili	District	Srikabulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Ramakav	M	60	emedical	Agriculture	Daily wage
	G. Shiva Ramakaju	M	24	Degree	company	Rs 4000

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: christian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows Oxen Buffaloes Sheep/Goats

(vii) Do you have own toilet? Yes/No

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

(iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9697 689421

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaiti
Group : CB2 - (B)
Registration Number : 2222 001049031
Area of the Survey conducted: Kondraguda

House No.	4-188	Habitat /Ward		Panchayat /Municipality	Chigumvelasa
Post office	Chigumvelasa	Mandal	Sambijili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Thaiti Vaide	M	39	uneducated	Agriculture	Daily wage
2.	G. Sruja bala	F	37	Patel	Asaworth	Monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: christian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

(vi) Livestock resources: Cows ___ Oxen ___ Buffaloes ___ Sheep/Goats ___

(vii) Do you have own toilet? Yes/No

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

(iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 8897217149

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chaut
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaiti
Group : CB2-B
Registration Number : 2222 001049031
Area of the Survey conducted: Kondraguda

House No.	<u>4-816</u>	Habitat /Ward		Panchayat /Municipality	<u>Chiguvulesa</u>
Post office	<u>Chiguvulesa</u>	Mandal	<u>Sambaji li</u>	District	<u>Srikakulam</u>

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
<u>1.</u>	<u>G. Chinnarao</u>	<u>M</u>	<u>24</u>	<u>11th</u>	<u>Agriculture</u>	<u>Daily wage</u>
<u>2.</u>	<u>G. Praveen</u>	<u>M</u>	<u>20</u>	<u>10th</u>	<u>company</u>	<u>Monthly</u>

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): Own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows Oxen Buffaloes Sheep/Goats

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9654218466 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chait
Signature of the Student

G
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaitra
Group : C32-13
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	11-126	Habitat /Ward		Panchayat /Municipality	Chiguruvalesa
Post office	Chiguruvalesa	Mandal	Sarabujjili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Rama brishna	M	22	Degree	Company	monthly
2.	G. Symalareu	M	19	10th	Agriculture	Daily wage

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: cristian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows ___ Oxen ___ Buffaloes ___ Sheep/Goats ___

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 8897748316

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chauti
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaiti
Group : CBZ B
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	6-188	Habitat /Ward		Panchayat /Municipality	Chiguruvalesa
Post office	Chiguruvalesa	Mandal	Seenu Sujjoti	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Khanamma	M	50	uneducated	Agriculture	Daily wage
2.	G. Srilatha	M	30	inter	Agriculture	Daily wage

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: christian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows ___ Oxen ___ Buffaloes ___ Sheep/Goats ___

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 986984612 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:


(i)

(ii)

(iii)

Place:

Date:


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
SOCIO - ECONOMIC SURVEY

Name of the Student : G. chaitri
Group : CB2 (B)
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	4-198	Habitat /Ward		Panchayat /Municipality	Chiguruvalesa
Post office	chiguruvalesa	Mandal	Sribalahari	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Sneha	F	25	Degree	Agriculture	Daily wage
2.	G. shakha	M	31	inter	Agriculture	Daily wage

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: male (iii) Religion: cristian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: _____ Acres

(vi) Livestock resources: Cows _____ Oxen _____ Buffaloes _____ Sheep/Goats _____

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt./Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 96 46 88 97 21

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i)

(ii) -

(iii) Ⓟ

Place:

Date:

G. Chaito

Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaitu
Group : CB2 (B)
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	2-146	Habitat /Ward		Panchayat /Municipality	Chiguruvola
Post office	Chiguruvola	Mandal	Janabujjili	District	Srikalahasti

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	K. prasanth	M	31	P.G	Employ	Daily monthly
2.	K. praveen	M	30	B.Tech	Employ	monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: neo cristian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows 1 Oxen 1 Buffaloes 1 Sheep/Goats 1

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9988989721

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

Chaitanya
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaitanya
Group : CB2 (B)
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	4-126	Habitat /Ward		Panchayat /Municipality	Chiguruvalese
Post office	Chiguruvalese	Marital	Suburbysili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	M. Srinu	M	40	Inter	Employee	Monthly
2.	M. Laxmi	F	30	iti	Company	Monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: male (iii) Religion: christian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows ___ Oxen ___ Buffaloes ___ Sheep/Goats ___

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9897245616

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaitu

Group : CB2 (B)

Registration Number : 222200104031

Area of the Survey conducted: Kondaguda

House No.	4-198	Habitat /Ward		Panchayat /Municipality	Chiguruvolasa
Post office	Chiguruvolasa	Mandal	Sankhigili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Gy. Mourite	M	21	Degree	Company	monthly
2.	Gy. Jasmi	F	20	B.Tech	Company	monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

(vi) Livestock resources: Cows ___ Oxen ___ Buffaloes ___ Sheep/Goats ___

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9641 9697 98 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chait
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
SOCIO - ECONOMIC SURVEY

Name of the Student : Gr. Chait
Group : CB2 (B)
Registration Number : 2222001049031
Area of the Survey conducted: Kondruga

House No.	<u>4-129</u>	Habitat /Ward		Panchayat /Municipality	<u>Chiguruvalesa</u>
Post office	<u>Chiguruvalesa</u>	Mandal	<u>Sarabijjili</u>	District	<u>Srikabulam</u>

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
<u>1.</u>	<u>P. Lavanya</u>	<u>34</u>	<u>M</u>	<u>uneducated</u>	<u>Agriculture</u>	<u>Daily wage</u>
<u>2.</u>	<u>P. Lakshman Rao</u>	<u>46</u>	<u>F</u>	<u>uneducated</u>	<u>Agriculture</u>	<u>Daily wage</u>

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: malu (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows — Oxen — Buffaloes ✓ Sheep/Goats —

- (vii) Do you have own toilet? Yes/No ✓
- (viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓
- (ix) Do you have white Ration Card? Yes/No ✓
- (x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

- (i) Allments in family:
- (ii) Treatment in which Hospital: Govt/Private ✓
- (iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

- (iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

- (i) Do You have TV: Yes/No ✓
- (ii) Do you have Mobile: Yes ✓
- (iii) Mobile Number: 6100241687
- (iv) Do you have Computer/Laptop: Yes/No ✓
- (v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

- (i)
- (ii)
- (iii)

Place:

Date:

G. Chait

Signature of the Student

[Signature]

Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaitu
Group : CB2 (B)
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	4-169	Habitat /Ward		Panchayat /Municipality	Chiguravasa
Post office	Chiguravasa	Mandal	Sarabujjili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
	G. Venkayya	M	60	uneducated	Agrical lab	Daily wage
	G. Sarojini	F	28	uneducated	Agriculture	Daily wage

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: cristian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

(vi) Livestock resources: Cows Oxen Buffaloes Sheep/Goats

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9988992149

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

A. Chandra
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chait

Group : CB2 B

Registration Number : 22220010490

Area of the Survey conducted: Kondraguda

House No.	2-120	Habitat /Ward		Panchayat /Municipality	Chiguruvalsa
Post office	Chiguruvalsa	Mandal	Sambugili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Suresh	M	30	P.G	Employee	monthly
2.	G. Usha Rani	F	30	B.Tech	employee	monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: coistian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows - Oxen - Buffaloes - Sheep/Goats

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 6126454621 ✓

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chaiti
Signature of the Student

Q
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaitanya
Group : CBZ (13)
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	4-166	Habitat /Ward		Panchayat /Municipality	Chiguvula
Post office	Chiguvula	Mandal	Sarabujili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Gy. Hematha	M	21	Degree	Agriculture	Daily wage
2.	Gy. Renatha	F	41	Degree	Agriculture	Daily wage

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: cristia

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows 1 Oxen 1 Buffaloes 1 Sheep/Goats 1

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 8897217461 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chaiti
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaitra
Group : CB2 (B)
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	4-196	Habitat /Ward		Panchayat /Municipality	Chigunuvalesa
Post office	Chigunuvalesa	Mandal	Saakalyipili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	P. Rohini	F	26	Degree	Company	Monthly
2.	P. Sathyavathi	F	40	uneducated	Agriculture	Daily wage

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows ___ Oxen ___ Buffaloes ___ Sheep/Goats ___

(vii) Do you have ~~own~~ toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9646521866 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chaudhary
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chanti
Group : CB2 (B)
Registration Number : 2222001049031

Area of the Survey conducted: Kondraguda

House No.	C1-120	Habitat /Ward		Panchayat /Municipality	Chigunuvulasa
Post office	Chigunuvulasa	Mandal	Sourbhijili	District	Srikulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Chanti	M	26	Degree	company	monthly
2.	G. Chandu	M	28	Degree	company	monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Christian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 11 Acres

(vi) Livestock resources: Cows Oxen Buffaloes Sheep/Goats

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 889721746

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chait
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chante
Group : CB2 (B)
Registration Number : 2222001049031
Area of the Survey conducted: Kondraguda

House No.	4-127	Habitat /Ward		Panchayat /Municipality	Chiguvula
Post office	Chiguvula	Mandal	Sarabujili	District	Srikulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Hemanth Kumar	M	21	Degree	Company	monthly
2.	Uma Mahesh	M	28	B.Tech	Company	monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: cristian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows ___ Oxen ___ Buffaloes ___ Sheep/Goats ___

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9988662671

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chaitu
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : G. Chaitu
Group : CBZ (B)
Registration Number : 2222001049031
Area of the Survey conducted: Kondiguda

House No.	4-169	Habitat /Ward		Panchayat /Municipality	Chiguruvalsa
Post office	Chiguruvalsa	Mandal	Serudupili	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	G. Shiva	M	26	B.Tel	Employee	Monthly
2.	G. Praveen	M	29	B.Tel	employee	monthly

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: male (iii) Religion: cristian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented):

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

(vi) Livestock resources: Cows Oxen Buffaloes Sheep/Goats

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 6122482171 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i)

(ii)

(iii)

Place:

Date:

G. Chauti
Signature of the Student

Signature of the Mentor

SOCIO - ECONOMIC SURVEY





AWARENESS PROGRAM



ATLANTA
Special Missions
2018



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chant
Group : B.Z.C (B)
Name of the mentor : Dr. Adinarayana
Name of the project : project worksheet

House No	Name of the person	Village / Ward	Mandal	District
3-21	G. Ramesh	Kondra guda	Sanubujili	Srikakulam

- How many times a day do you eat?
3 times
- Please answer the following according to your particular eating habits?
 - I eat a good breakfast
 - I experienced feeling of hunger during the day
 - I eat meat.
 - I eat vegetables.
 - I eat fruits.
 - I eat dairy products
 - I eat sweets.
- What meal would you consider to be your main meal of the day?
 - Breakfast
 - lunch
 - dinner
 - others
- What does your main meal consist of and how it is prepared?
 - Freshly prepared.
 - restaurant meal.
 - precooked microwave.
 - other
- Have you been avoiding some foods for health reasons? Yes / No
- Do you have any particular food allergies?

NO

- What is your daily food intake frequency of the following food categories?

Sweet foods:

Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

NO Yes

12. Have your ever been on a diet, if so, what kind?

Yes NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

Healthest food: fruit, vegetables

Un Healthest Food: Junk Food.

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. b. little impact c. big impact. D. none

Health

a. No impact. b. little impact c. big impact. D. none

Weight.

a. No impact. b. little impact c. big impact. D. none

Mental condition.

a. No impact. B. little impact c. big impact. D. none

G. chait
Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chait
Group : CB2 (B)
Name of the mentor : Do. Adinarayana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
3-156	G. Anil	Kondraguda	Sarabuzilli	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast
- I experienced feeling of hunger during the day
- I eat meat.
- I eat vegetables.
- I eat fruits.
- I eat dairy products
- I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch dinner d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthest food: fruits, vegetables

un healthest food: Junk Food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. little impact c. big impact. D. none

Health

a. No impact. little impact c. big impact. D. none

Weight.

a. No impact. little impact c. big impact. D. none

Mental condition.

No impact. B. little impact c. big impact. D. none

G. chait
Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaiti
Group : CBZ. (B)
Name of the mentor : Dr. Adinarayana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
4-126	K. prasanth	Kondragada	Sarabujji li	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food : vegetables, fruits.
unhealthiest food : Junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

G. Chait
Signature of the Student

[Signature]
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaiti
Group : CB2 (B)
Name of the mentor : Dr. Adinarayana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
4-126	G. Suresh	Kondraguda	Sarubajili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast
- I experienced feeling of hunger during the day
- I eat meat.
- I eat vegetables.
- I eat fruits.
- I eat dairy products
- I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch dinner d. others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

Yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: fruits, vegetables
unhealthiest food: Junk Food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chantu
Group : CBZ (B)
Name of the mentor : Dr. Adithyanjana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
4-106	G. Chantanya	Kondraguda	Sarabjili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

a. I eat a good breakfast

b. I experienced feeling of hunger during the day

c. I eat meat.

d. I eat vegetables.

e. I eat fruits.

f. I eat dairy products

g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

a. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

Several times a day once a day several times a week

less often never

Fresh vegetables & Fruits:

Several times a day once a day several times a week

less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

No

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food : vegetables, fruits
unhealthiest food : junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. little impact c. big impact. D. none

Health

a. No impact. little impact c. big impact. D. none

Weight.

a. No impact. little impact c. big impact. D. none

Mental condition.

No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitu
Group : CBZ. (B)
Name of the mentor : D. Anirudh Reddy
Name of the project : project work

House No	Name of the person	Village / Ward	Mandal	District
5-111	G. Ramesh	Kondra guda	Sanubujjili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast
- I experienced feeling of hunger during the day
- I eat meat.
- ~~I eat vegetables.~~
- I eat fruits.
- I eat dairy products
- I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch ~~c. dinner~~ d. others

4. What does your main meal consist of and how it is prepared?

- ~~a. Freshly prepared.~~ B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / ~~No~~

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

No

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food : vegetables, fruits

unhealthiest food : junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

G. Chavla
Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaiti
Group : CB2 CB
Name of the mentor : Dr. A. Srinayana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
5-121	G. Mahesh	Kondraguda	Samubujili	Sriakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

no

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
- less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
- less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

No

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

No

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food : fruits, vegetables
unhealthiest food : junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitanya
Group : CBZ - (B)
Name of the mentor : Dr. Anandharayana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
6-221	Y. Jayanth Kumar	Kondraguda	Samubujili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

No
11. Do you know your current body mass index?

yes
12. Have your ever been on a diet, if so, what kind?

NO
13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: vegetables, fruits
un healthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. b. little impact. c. big impact. D. none

Health

a. No impact. b. little impact c. big impact. D. none

Weight.

a. No impact. b. little impact c. big impact. D. none

Mental condition.

a. No impact. B. little impact c. big impact. D. none

G. Chait
Signature of the Student

[Signature]
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitra
Group : CBZ (B)
Name of the mentor : Dr. Anuragana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
S-127	G. shiva	Konchaguda	Sarabujili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

No

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

No

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: fruits, vegetables

unhealthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. b. little impact. c. big impact. D. none

Health

a. No impact. b. little impact. c. big impact. D. none

Weight.

a. No impact. b. little impact. c. big impact. D. none

Mental condition.

a. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaiti
Group : CB2 (B)
Name of the mentor : G. Srinivasan
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
S-216	G. Sunyakumar	Kondraguda	Sarubujjili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast
- I experienced feeling of hunger during the day
- I eat meat.
- I eat vegetables.
- I eat fruits.
- I eat dairy products
- I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

No

11. Do you know your current body mass index?

Yes

12. Have your ever been on a diet, if so, what kind?

No

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food : vegetables , fruits
unhealthiest food : Junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health


a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitu
Group : CRZ (13)
Name of the mentor : D. Adinarayana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
6-215	D. Karthik.	Kondraguda	Sarubujjili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems? *no*

No

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: fruits, vegetables
unhealthiest food: junk food.

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. little impact c. big impact. D. none

Health

a. No impact. little impact c. big impact. D. none

Weight.

a. No impact. little impact c. big impact. D. none

Mental condition.

No impact. B. little impact c. big impact. D. none

G. Chandel
Signature of the Student

[Signature]
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. charvi
Group : CBZ. (B)
Name of the mentor : Dr. Adinarayana
Name of the project : project workshop

House No	Name of the person	Village / Ward	Mandal	District
6-29	E. Dileep	Konduguda	Sanubujjili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

no

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

no

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: fruits, vegetable

unhealthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

Signature of the Student

Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitu
Group : CBZ (B)
Name of the mentor : Dr. Perinambayana
Name of the project : project working :

House No	Name of the person	Village / Ward	Mandal	District
6-130	G. Nani	Kondraguda	Samudrajili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

No

11. Do you know your current body mass index?

Yes

12. Have your ever been on a diet, if so, what kind?

No

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food : fruit, vegetables

unhealthiest food : junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

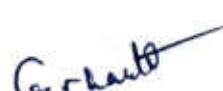
a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chait
Group : CB2 (a)
Name of the mentor : A. Adinarayana
Name of the project : project writing

House No	Name of the person	Village / Ward	Mandal	District
2-226	G. Kiran Kumar	Kondra guda	Sanubujjili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast
- I experienced feeling of hunger during the day
- I eat meat.
- I eat vegetables.
- I eat fruits.
- I eat dairy products
- I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch dinner d. others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

No

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

No

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: vegetables, fruits

un healthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chait
Group : CB2 (B)
Name of the mentor : K. Adinarayana
Name of the project : project washing

House No	Name of the person	Village / Ward	Mandal	District
2-131	ydalaya	Kondraguda	Sanubilli	Srikeelam

1. How many times a day do you eat?

- 3 times
2. Please answer the following according to your particular eating habits?
- I eat a good breakfast
 - I experienced feeling of hunger during the day
 - I eat meat.
 - I eat vegetables.
 - I eat fruits.
 - I eat dairy products
 - I eat sweets.
3. What meal would you consider to be your main meal of the day?
- a. Breakfast b. lunch dinner d. others
4. What does your main meal consist of and how it is prepared?
- Freshly prepared. B. restaurant meal. C. precooked microwave. D. other
5. Have you been avoiding some foods for health reasons? Yes / No
6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

no

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views? healthiest food: vegetables, fruits

unhealthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. b. little impact. c. big impact. D. none

Health

a. No impact. b. little impact c. big impact. D. none

Weight.

a. No impact. b. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

G. S. S.
Signature of the Student

[Signature]
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaiti
Group : CB2 (B)
Name of the mentor : Dr. A. Adinarayana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
1-163	K. paparau	(condragada	Sanalupili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast
- I experienced feeling of hunger during the day
- I eat meat.
- I eat vegetables.
- I eat fruits.
- I eat dairy products
- I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthest food: vegetables, fruits

unhealthest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health


a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitra
Group : CBS2 (B)
Name of the mentor : Dr. [Signature]
Name of the project : project writing

House No	Name of the person	Village / Ward	Mandal	District
2-165	P. Lakshman Rao	Condraguda	Samudrali	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
- less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
- less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

no

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

no

13. Mention the food items from the healthiest to the unhealthiest from your point of views?
healthiest food: vegetables, fruits

unhealthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaiti
Group : CB2 (B)
Name of the mentor : D. A. Dinakrishna
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
2-155	G. Bela Krishna	Kondra guda	Sarabussili	Srikakulam

1. How many times a day do you eat?

2 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

no

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

no

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: vegetables, fruits

unhealthiest food: junk food,

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. ~~B.~~ little impact c. big impact. D. none

Health

a. No impact. ~~B.~~ little impact c. big impact. D. none


Weight.

a. No impact. ~~B.~~ little impact c. big impact. D. none

Mental condition.

~~A.~~ No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chait
Group : CB2 (B)
Name of the mentor : D. Adinarayana
Name of the project : project writing

House No	Name of the person	Village / Ward	Mandal	District
2-129	G. Sanjeeb	Kondraguda	Sarabussili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food : fruits, vegetable

un healthiest food : junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

G. Choudhary
Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitu
Group : CB2-(B)
Name of the mentor : Dr. Asha Rani
Name of the project : project working :

House No	Name of the person	Village / Ward	Mandal	District
2-165	G. Ramarao	Chandrajuda	Saradujjili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast
- I experienced feeling of hunger during the day
- I eat meat.
- I eat vegetables.
- I eat fruits.
- I eat dairy products
- I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch dinner d. others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems? *

no

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

no

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: fruits, vegetables
unhealthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitu
Group : CBZ(B)
Name of the mentor : Dr. Adinarayana
Name of the project : Project working

House No	Name of the person	Village / Ward	Mandal	District
2-267	G. Hanibabu	Kondraguda	Samudrala	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

a. I eat a good breakfast

b. I experienced feeling of hunger during the day.

c. I eat meat.

d. I eat vegetables.

e. I eat fruits.

f. I eat dairy products

g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

A. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

No

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

Several times a day

once a day

several times a week

less often

never

Fresh vegetables & Fruits:

Several times a day

once a day

several times a week

less often

never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

Yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: fruits, vegetables

unhealthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitu
Group : CBZ (B)
Name of the mentor : D. Adinarayana
Name of the project : project working

House No	Name of the person	Village / Ward	Mandal	District
a-167	G. Rama Krishna	Kondraguda	Sarebuzili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast
- I experienced feeling of hunger during the day
- I eat meat.
- I eat vegetables.
- I eat fruits.
- I eat dairy products
- I eat sweets.

3. What meal would you consider to be your main meal of the day?

- Breakfast
- lunch
- dinner
- others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared.
- restaurant meal.
- precooked microwave.
- other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

Several times a day once a day several times a week

less often never

Fresh vegetables & Fruits:

Several times a day once a day several times a week

less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: fruits, vegetables
unhealthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact ; c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

G. Chaiti
Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chanti
Group : CBZ (B)
Name of the mentor : D. Adinardiana
Name of the project : project work

House No	Name of the person	Village / Ward	Mandal	District
2-169	G. Ramarao	Kondraguda	Sanubujjili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
- b. I experienced feeling of hunger during the day
- c. I eat meat.
- d. I eat vegetables.
- e. I eat fruits.
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
- less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
- less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

Yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

healthiest food: vegetables, fruits.
unhealthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

G. Chait
Signature of the Student

[Signature]
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : G. Chaitu
Group : CB2 (B)
Name of the mentor : A. J. Narayana
Name of the project : project workshop

House No	Name of the person	Village / Ward	Mandal	District
2-161	G. prasad	Kondraguda	Sanubugili	Srikakulam

1. How many times a day do you eat?

3 times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast
- I experienced feeling of hunger during the day
- I eat meat.
- I eat vegetables.
- I eat fruits.
- I eat dairy products
- I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch dinner d. others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

11. Do you know your current body mass index?
^{NO}

12. Have your ever been on a diet, if so, what kind?
^{yes}

13. Mention the food items from the healthiest to the unhealthiest from your point of views?
^{NO}

healthiest food: fruits, vegetable.
unhealthiest food: junk food

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. b. little impact c. big impact. D. none

Health


a. No impact. b. little impact c. big impact. D. none

Weight.

a. No impact. b. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor

FOOD HABITS





CONCLUSION

I'm **chanti** studying in B.sc first year Cbz group. I had completed the community service project on "FOOD HABITS" in our Village and submitted the report to my mentor. My project is about the food habits of our Village people. I conducted questionnaire to different age groups people about their regular diet. Most of the old aged people considered lunch as their main meal of the day. They taking food only two times per day due to digestive problems. We find out the major problem facing by our villagers and dropped the Sarpanch attention towards the problem by conducting awareness program in our Village.

It was interesting to carry out this project to know about different opinions, food habits and problems of our villagers. Finally I believe that my project is complete under vision of my mentor. I thank him for his guidance and support.

By

Gudivada.chanti