

**A PROJECT
ON
COMMUNITY SERVICE**

Submitted in the partial fulfilment of the requirements for the award
of degree BSc

By

VADA ANJALI

2222001049088

Semester 2(BZC)

Batch 2022-2025

Under the supervision

D.Raveendra

Lecturer in Botany

GOVERNMENT DEGREE COLLEGE(Men),SRIKAKULAM



WEBSITE: www.gcmsklm.ac.in

ACKNOWLEDGEMENT

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

I would like to thank all the staff from the department of Botany 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 Kumari Vada Anjali studying Bsc Bzc group has completed and submitted the project report on "FOOD HABITS" further partial fulfilment of the requirements for the award of Bachelor of Science under my supervision during the academic year 2022-23.

Date:
Place:



Project guide
D.Raveendra
Lecturer in Botany
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 fulfilment of the requirement for the award of the degree of Bsc Bzc is a record of bonified project work carried out by me under the guidance of D.Raveendra 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.

Date:

Place: Srikakulam

Signature of the candidate

Name: V. Anjali

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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. Somet by 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 idiosyncracies 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.

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 Chittaripuram village, Santhakaviti mandal and Vizianagaram district. Approximately 25 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:

This 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 age group.

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 details.

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : V. Anjali
 Group : Bsc (BZ)
 Registration Number : 2222001049088
 Name of the Mentor : D. Ravindra sir
 Name of the Project : Food habits

| Date & Day | Activity done | Number of Hours Spent | Signature of the student |
|------------|-----------------------|-----------------------|--------------------------|
| 9-5-23 | socio Economic survey | 7 hours | V. Anjali |
| 10-5-23 | socio Economic survey | 3 hours | V. Anjali |
| 11-5-23 | socio Economic survey | 6 hours | V. Anjali |
| 12-5-23 | socio Economic survey | 5 hours | V. Anjali |
| 13-5-23 | socio Economic survey | 4 hours | V. Anjali |
| 14-5-23 | socio Economic survey | 2 hours | V. Anjali |
| 15-5-23 | socio Economic survey | 9 hours | V. Anjali |
| 16-5-23 | socio Economic survey | 7 hours | V. Anjali |
| | | | |
| | | | |

D. Ravi
 Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : V. Anjali
 Group : BSC (CBZ)
 Registration Number : 2222001079088
 Name of the Mentor : D. Ravindra Sir
 Name of the Project : Food habits

| Date & Day | Activity done | Number of Hours Spent | Signature of the student |
|------------|---------------------|-----------------------|--------------------------|
| 17-5-23 | Awariness programme | 5 hrs | V. Anjali |
| 18-5-23 | Awariness programme | 7 hrs | V. Anjali |
| 19-5-23 | Awariness programme | 5 hrs | V. Anjali |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

D. Ravindra
 Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : V. Anjali
Group : Bsc (CBZ)
Registration Number : 2222001049088
Name of the Mentor : D. Ravindra sir
Name of the Project : Food habits

| Date & Day | Activity done | Number of Hours Spent | Signature of the student |
|------------|---------------|-----------------------|--------------------------|
| 20-5-23 | Food habits | 5 hours | V. Anjali |
| 21-5-23 | Food habits | 6 hours | V. Anjali |
| 22-5-23 | Food habits | 3 hours | V. Anjali |
| 23-5-23 | Food habits | 9 hours | V. Anjali |
| 24-5-23 | Food habits | 8 hours | V. Anjali |
| 25-5-23 | Food habits | 4 hours | V. Anjali |
| 26-5-23 | Food habits | 6 hours | V. Anjali |
| 27-5-23 | Food habits - | 4 hours | V. Anjali |
| 28-5-23 | Food habits | 3 hours | V. Anjali |
| | | | |

D. Ravi

Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : V. Anjali
Group : Bsc (CBZ)
Registration Number : 2222001049088
Name of the Mentor : D. Ravindra Sir
Name of the Project : Food habits.

| Date & Day | Activity done | Number of Hours Spent | Signature of the student |
|------------|-----------------|-----------------------|--------------------------|
| 29-5-23 | project writing | 8 hrs | V. Anjali |
| 30-5-23 | project writing | 9 hrs | V. Anjali |
| 31-5-23 | project writing | 4 hrs | V. Anjali |
| 1-6-23 | project writing | 7 hrs | V. Anjali |
| 2-6-23 | Project writing | 5 hrs | V. Anjali |
| 3-6-23 | Project writing | 3 hrs | V. Anjali |
| 4-6-23 | project writing | 1 hrs | V. Anjali |
| 5-6-23 | project writing | 2 hrs | V. Anjali |
| 6-6-23 | Project writing | 5 hrs | V. Anjali |
| 7-6-23 | Project writing | 6 hrs | V. Anjali |

D. Ravi
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY CONSOLIDATION REPORT

Name of the student : V. Anyali
Group : B7c
Name of the Mentor : D. Ravindra Siv
Name of the Project : Food Habits

| | | | | | |
|------------------|---------------|-----------|---------------|-------------|---------------|
| Ward/ Habitat | chittaripuram | Panchayat | chittaripuram | Post Office | chittaripuram |
| Mandal | santalaviti | District | Vizayanagara | Pin Code | 532168 |

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

2. Number of Houses Caste-wise:

SC ___ ST ___ OC ___ BC-A 5 BC-B ___ BC-C ___ BC-D 20

3. Common Health problems in the Habitat/Ward:

(i) fever

(ii) suger

(iii)

4. Number of White Ration Cards: 25

5. Number of Illiterates in the Ward/ Habitat/ Village: 32

6. Number of Graduates in the Ward/ Habitat/ Village: 10

7. Number of Job Holders: 2

8. Number of PWD People: NO

9. Number of DWACRA Groups in the Ward/ Habitat/ Village: 3

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

11. Bus facility available: Yes / No

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

(i) water

(ii) street lights

(iii) drynage

(iv) roads

D. Ravindra Siv
Signature of the Mentor

V. Anyali
Signature of the Student



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali

Group : B7C

Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 1-14-3 | Habitat /Ward | chittavipuram | Panchayat /Municipality | chittavipuram |
| Post office | chittavipuram | Mandal | sanchalakuthi | District | Vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | P. Laxmi | F | 55 | - | - | NO |
| 2. | P. Indira | F | 37 | 4th | maid | 6000 |
| | | | | | | |
| | | | | | | |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC ✓ (ii) Sub-Caste: Depara nri ✓ (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: _____ Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO.

... vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle
... Yes/No ... others specify

4. Health Details:

- (i) Ailments in family: NO
(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: 9491679584 ✓
(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) water
(ii) Drinage
(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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

Name of the Student : V. Anjali
Group : BZC
Registration Number : 2222001049088
Area of the Survey conducted:

| | | | | | |
|-------------|----------------|---------------|----------------|-------------------------|----------------|
| House No. | 1-12-2 | Habitat /Ward | Chittooripuzam | Panchayat /Municipality | Chittooripuzam |
| Post office | Chittooripuzam | Mandal | Sambakurthi | District | Vishakhapatnam |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | y. Venkata Ramana | M | 49 | 5th | Tailor | 8000 |
| 2. | y. Tulasi | F | 45 | 10th | Housewife | - |
| 3. | y. Devi | F | 21 | degree | studying | - |
| 4. | y. Chandini | F | 18 | degree | studying | - |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Devang (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: NO Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO

(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: NO ✓

(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: 8074 175534 ✓

(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) water

(ii) Drinage

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B7C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 2-37 | Habitat /Ward | chittavipuram | Panchayat /Municipality | chittavipuram |
| Post office | chittavipuram | Mandal | saukhaviti | District | vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | G. Rama | F | 38 | 7th | Business | 6000 |
| 2. | G. sravani | F | 19 | degree | stitching | - |
| 3. | G. palani | F | 22 | 10th | Housewife | - |
| 4. | G. Ganesh | M | 30 | 10th | Business | 6000 |
| | | | | | | |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kaling (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: NO Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO

(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: NO ✓

(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: 8074175334 ✓

(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) water

(ii) drainage

(iii)

Place:

Date:

V. Ajali
Signature of the Student

D. Ray
Signature of the Mentor



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

Name of the Student : V. Anjali
Group : B7C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|----------------|---------------|--------------------------|---------------|
| House No. | 3-12 | Habitat / Ward | Chittavipuzam | Panchayat / Municipality | Chittavipuzam |
| Post office | Chittavipuzam | Mandal | Saundhakaviti | District | Vijayanagara |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | K. Radha | M | 40 | - | Labour | 8000 |
| 2. | K. Lakshmi | F | 47 | - | Housewife | - |
| 3. | K. Sai | M | 21 | degree | studying | - |
| 4. | K. Anitha | F | 19 | degree | studying | - |

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: kapu (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: NO Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO.

(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: NO

(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: 6301887726

(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) water

(ii) street light

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ravi
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 1-31 | Habitat /Ward | chittaripuram | Panchayat /Municipality | chittaripuram |
| Post office | chittaripuram | Mandal | southakaviti | District | Nizakunigal |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | R. Ramana | M | 48 | - | Farmer | 5000 |
| 2. | R. Nagamani | F | 48 | 7th | Housewife | - |
| 3. | R. Anjali | F | 19 | Degree | studying | - |
| | | | | | | |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Velama (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: 1/2 Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes 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: 818 7038558

(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) water

(ii) street lights

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : S V. Anjali
Group : BZC
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 2-206 | Habitat /Ward | chittaripuram | Panchayat /Municipality | chittaripuram |
| Post office | chittaripuram | Mandal | southakaviti | District | Vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | K. Atchayya | M | 45 | - | Farmer | 8000 |
| 2. | K. Narsamma | F | 40 | - | Housewife | - |
| 3. | K. Chakravarthy | F | 16 | Inter | studying | - |
| 4. | K. Nandji | M | 11 | 7th | studying | - |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/OC (ii) Sub-Caste: Yadav (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 NO Oxen NO Buffaloes NO Sheep/Goats NO

(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: NO

(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: 7360910860

(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) street lights
- (ii) Dringage
- (iii) Road

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088
Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|-----------------|
| House No. | 2-204 | Habitat /Ward | chittavipuram | Panchayat /Municipality | chittavipuram |
| Post office | chittavipuram | Mandal | southakaliti | District | Vitthalavogaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | G. Simhana | M | 59 | 10th | Farmer | 80000 |
| 2. | G. Raghavamma | F | 46 | - | Housewife | - |
| 3. | G. Sathya | M | 25 | B.Tech | Engineering | - |
| 4. | G. Pavan | F | 23 | Banking | Manager | - |

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: Velama (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: 6 Acres

(vi) Livestock resources: Cows 10, Oxen 10, Buffaloes 10, Sheep/Goats 10.

(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: NO ✓

(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: 7659801915 ✓

(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) street lights

(ii) water

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 52 | Habitat /Ward | chittaripuram | Panchayat /Municipality | chittaripuram |
| Post office | chittaripuram | Mandal | santhakaviti | District | Vizayanagara |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | G. Srinu | M | 42 | 7th | MASON | 4000 |
| 2. | G. Vanaja | F | 35 | 10th | housewife | - |
| 3. | G. Manikanta | M | 18 | Degree | studying | - |
| 4. | G. Gayatri | F | 16 | inter | studying | - |
| 5. | G. Jaganathan | M | 62 | 4th | Measurment | 8000 |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Vokkaliga (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: 3 Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO.

(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: NO

(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: 7674080476 ✓

(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) Drainage

(ii) water

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ravi
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anyali

Group : BZC

Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 3-46 | Habitat /Ward | chittavipuram | Panchayat /Municipality | chittavipuram |
| Post office | chittavipuram | Mandal | santhakaviti | District | Vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | N. Manikyam | F | 45 | - | Housewife | - |
| 2. | N. Ramu | M | 32 | inter | Business | 10000 |
| 3. | N. Jyothsna | F | 28 | degree | Teacher | 8000 |
| 4. | N. prakash. | M | 12 | 7th | student | - |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kapu (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: NO Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO.

- (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: NO ✓
- (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: 76001242572 ✓
- (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) street lights
- (ii) water
- (iii) drainage

Place:

Date:

S. V. Anjali
Signature of the Student

D. Rany
Signature of the Mentor



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

Name of the Student : V. Anjali
 Group : B7C
 Registration Number : 2222001049088
 Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 1-15 | Habitat /Ward | Chittaripuram | Panchayat /Municipality | Chittaripuram |
| Post office | Chittaripuram | Mandal | Southakaviti | District | Vitthalanagar |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1 | R. KANTHARAO | M | 48 | 3rd | farmer | 12000 |
| 2 | R. ARUNA | F | 45 | 5th | Housewife | - |
| 3 | R. MALINIKA | F | 17 | Degree | studying | - |
| 4 | R. YASHINI | F | 16 | Degree | studying | - |

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: Sondi (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: 1.5 Acres

(vi) Livestock resources: Cows 1 Oxen 2 Buffaloes NO Sheep/Goats NO.

(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: NO ✓

(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: 6303298614 ✓

(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) Road are bad

(ii) Drinage

(iii) street light

Place:

Date:

V. Anjali
Signature of the Student

D. Ravi
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali

Group : BZC

Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 2-4 | Habitat /Ward | chittaripuram | Panchayat /Municipality | chittaripuram |
| Post office | chittaripuram | Mandal | sandhalaviti | District | Vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1 | L. Nagalingam | F | 51 | Inter | Business | 10000 |
| 2 | L. Venkatarao | M | 58 | - | Mason | - |
| 3 | L. Rameshvaran | M | 29 | B.Tech | Engineering | - |
| 4 | L. Uma | F | 24 | Degree | freelance | - |

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: velama (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: 5 Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO.

(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: NO

(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: 99.666 90150 ✓

(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) Road

(ii) Dryness

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali

Group : BZC

Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 3-21 | Habitat /Ward | Chittaripuram | Panchayat /Municipality | Chittaripuram |
| Post office | Chittaripuram | Mandal | Santhakavil | District | Vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1 | K. Mani | M | 24 | 10th | BUSINESS | 20000 |
| 2 | K. Jyothi | F | 21 | 12th | Housewife | - |
| 3 | K. Bhargavi | M | 9 | 4th | student | - |
| 4 | K. Appaluna | F | 48 | - | Housewife | - |
| | | | | | | |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/OC (ii) Sub-Caste: Yadav (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: _____ Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO.

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

(viii) Type Cooking fuel used: LPG/Coal/wood/other

(ix) Do you have water ration card? Yes/No

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

4. Health Details:

(i) Ailments in family: NO

(ii) Treatment in which Hospital: Govt/Private

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

| S.No. | Name of the Person | Gender | Age | Relation of Person |
|-------|--------------------|--------|-----|--------------------|
| | | | | |
| | | | | |
| | | | | |

(iv) Do you have Govt. Aarogya SA Card? Yes/No

5. Other Details:

(i) Do you have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9160373431

(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) street light,

(ii) drainage

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Roy
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088
Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 1-86 | Habitat /Ward | chittaripuram | Panchayat /Municipality | chittaripuram |
| Post office | chittaripuram | Mandal | santhakaviti | District | vijayanagara |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | B. Venu | M | 49 | 10-th | Master | 8000 |
| 2. | B. Ramanamma | F | 42 | - | House wife | - |
| 3. | B. Ratha | F | 15 | 10-th | studying | - |
| 4. | B. Sai | M | 13 | 8-th | studying | - |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Rajak (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: _____ Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO.

- (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: NO ✓
 (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: 8501987242 ✓
 (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) water ✓
 (ii) street lights ✓
 (iii)

Place:

Date:

V. Anjali
 Signature of the Student

D. Ray
 Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali

Group : B7C

Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 1-36 | Habitat /Ward | chittavipuram | Panchayat /Municipality | chittavipuram |
| Post office | chittavipuram | Mandal | santhakaviti | District | vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1 | B. Rajarao | M | 46 | - | Farmer | 5500 |
| 2 | B. Ramakrishna | F | 39 | - | Housewife | - |
| 3 | B. DEVI | F | 17 | Inter | studying | - |
| 4 | B. Sumalatha | F | 16 | Inter | studying | - |
| 5 | B. Dharam | F | 14 | 9th | studying | - |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Yadav (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 1 Oxen NO Buffaloes NO Sheep/Goats NO.

- (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: NO ✓
- (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: 7036873037 ✓
- (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) water
- (ii) Drinoge
- (iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Rany
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 22220010490 88
Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 3-21 | Habitat /Ward | chittavipuram | Panchayat /Municipality | chittavipuram |
| Post office | chittavipuram | Mandal | santakaviti | District | vitayanasaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1 | K. Appanna | M | 52 | 10th | Mason | 8000 |
| 2 | K. Janaki | F | 48 | 7th | Housewife | - |
| 3 | K. Swathi | F | 21 | Inter | Student | - |
| 4 | K. Jyothi | F | 19 | Inter | Student | - |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Velam (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 NO Oxen NO Buffaloes NO Sheep/Goats NO

(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: NO ✓

(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: 7660042572 ✓

(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) water

(ii) orynage

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|--------------------------------|---------------|-------------|-------------------------|-----------------------------|
| House No. | 101 | Habitat /Ward | main street | Panchayat /Municipality | Chittaripuram Gatavalasa |
| Post office | vasudevapuram chittaripuram | Mandal | santakaviti | District | VITANAGAR |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | S. Lakshminaidu | M | 53 | - | farmer | 10.000 |
| (2) | S. Neelamma | F | 45 | - | housewife | - |
| (3) | S. Dhana Lakshmi | F | 18 | Degree | - | - |
| (4) | S. Pravalika | F | 17 | Inter | - | - |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC ✓ (ii) Sub-Caste: Yadav (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 NO Buffaloes NO Sheep/Goats NO.

(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: 9912473807 ✓

(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) water

(ii) street lights

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|-------------|-------------------------|---------------|
| House No. | SC-215 | Habitat /Ward | coraly | Panchayat /Municipality | chittaripuram |
| Post office | chittaripuram | Mandal | santalalith | District | Viranogaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | L. Suryanarayana | M | 50 | - | farmer | 7000 |
| (2) | L. rathnamma | F | 42 | - | housewife | - |
| (3) | L. suresh | M | 20 | degree | - | - |
| | | | | | | |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC ✓ (ii) Sub-Caste: kopu (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 NO Buffaloes NO Sheep/Goats NO

(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: 8500933158 ✓

(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) water

(ii) street lights

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ravi
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|------------------------------|---------------|-------------|-------------------------|-----------------------------|
| House No. | 102 | Habitat /Ward | Main street | Panchayat /Municipality | Chittavipuzam Golevalasa |
| Post office | Vasulapuram Chittavipuzam | Mandal | Santakaviti | District | Vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | S. Eswari Rao | M | 48 | - | farmer | 10000 |
| (2) | S. Nagamma | F | 44 | - | housewife | - |
| (3) | S. Poojalekshmi | M | 23 | Degree | - | - |
| | | | | | | |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC ✓ (ii) Sub-Caste: Yadav (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 NO Buffaloes NO Sheep/Goats NO ✓

(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: 9550016730

(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) water

(ii) street lights

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|--------------------------------|---------------|-------------|-------------------------|-----------------------------|
| House No. | 104 | Habitat /Ward | Main street | Panchayat /Municipality | Chittaripuram Golabalasa |
| Post office | Vasudavapuram Chittaripuram | Mandal | Santakaviti | District | Vizayanagara |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | S. Asirindalu | M | 45 | - | farmer | 10000 |
| (2) | S. Appamma | F | 39 | - | housewife | |
| (3) | S. Durga prasad | M | 22 | degree | - | |
| (4) | S. Rajeswari | F | 16 | inter | - | |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Yadav (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 FWD 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: 9347337169 ✓

(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) water

(ii) street lights

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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

Name of the Student : V. Anjali
Group : B-2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|-------------|----------------|-------------|--------------------------|--------------|
| House No. | SC-120 | Habitat / Ward | Main street | Panchayat / Municipality | Godavallasa |
| Post office | Vasudavaram | Mandal | Santakaliti | District | Vizayanagara |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | Y. Nagasimha Rao | M | 47 | - | farmer | 10000 |
| (2) | Y. PUSPA | F | 44 | - | - | - |
| (3) | Y. Pravalika | F | 18 | degree | - | - |
| (4) | Y. Rajesh | M | 13 | 8th class | - | - |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kapu (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 NO Buffaloes NO Sheep/Goats NO.

(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: 9154533066 ✓

(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) Dringage

(ii) water

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|--|---------------|-------------|-------------------------|------------------------------|
| House No. | 106 | Habitat /Ward | main street | Panchayat /Municipality | Chittavipuzham Gottalorza |
| Post office | Vasudevan chittavipuzham | Mandal | santakaviti | District | srikavitarapuram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | K. Neelayya | M | 42 | - | farmer | 10000 |
| (2) | K. Lakshmi | F | 36 | - | Home wife | - |
| (3) | K. Krishna Veni | F | 15 | 10th | - | - |
| (4) | K. Ganesh | M | 12 | 7th | - | - |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: yadav (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 NO Buffaloes NO Sheep/Goats NO.

(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: 8712115772 ✓

(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) water

(ii) street light

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|------------------------------|---------------|-------------|-------------------------|------------------------------|
| House No. | 275 | Habitat /Ward | Conaly | Panchayat /Municipality | Chittalapudi Govindapuram |
| Post office | Govindapuram Chittalapudi | Mandal | Sautakaviti | District | Vizianagaram. |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | L. Savitramma | F | 60 | - | farmer | 10000 |
| (2) | L. Somesh | M | 35 | - | hobby - | |
| (3) | L. satya | F | 32 | - | - | |
| (4) | L. san | M | 6 | 3rd | - | |
| (5) | L. Meghana | F | 4 | 2nd | - | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: KOPU (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 NO Buffaloes NO Sheep/Goats NO.

(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: 8712115772 ✓

(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) water

(ii) street light

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|------------------------------|---------------|-------------|-------------------------|------------------------------|
| House No. | 275 | Habitat /Ward | Conaly | Panchayat /Municipality | Chittalapudi Govindapuram |
| Post office | Govindapuram Chittalapudi | Mandal | Santakaviti | District | Vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | L. Savitramma | F | 60 | - | father | 10000 |
| (2) | L. Suresh | M | 35 | - | hobby | - |
| (3) | L. satya | F | 32 | - | - | - |
| (4) | L. Sai | M | 6 | 3rd | - | - |
| (5) | L. Meghana | F | 4 | 2nd | - | - |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: KOPU (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 NO Buffaloes NO Sheep/Goats NO.

(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: 8142523180 ✓

(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) water

(ii) street lights

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ravi
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B.S.C (CBZ)
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|----------------------------|---------------|-------------|-------------------------|----------------------------|
| House No. | 2-74 | Habitat /Ward | Conaly | Panchayat /Municipality | Govindapuram chittavipuzha |
| Post office | Govindapuram chittavipuzha | Mandal | santakaviti | District | Vizayanagara |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | A V. Appalaraju | M | 48 | | farmer | 10000 |
| (2) | V. Uma | F | 40 | | house wife | |
| (3) | V. Divya | F | 18 | degree | - | |
| (4) | V. Surajamma | F | 60 | | - | |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/OC ✓ (ii) Sub-Caste: kapu (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 NO Buffaloes NO Sheep/Goats NO.

(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: 9705884634 ✓

(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) street lights

(ii) water

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Rany
Signature of the Mentor



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

Name of the Student : V. Anjali
Group : B7C
Registration Number : 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | SC 181 | Habitat /Ward | chittavipuzam | Panchayat /Municipality | chittavipuzam |
| Post office | chittavipuzam | Mandal | santakaviti | District | Vizianagaram |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| (1) | R. parvathesam | M | 54 | - | FORMER | 5000 |
| (2) | B. Snyalamma | F | 50 | - | HOUSE WIFE | - |
| (3) | R. Narayanaswari | M | 22 | - | | - |
| (4) | R. Purnavathi | F | 28 | - | | - |
| (5) | R. TAVITI NAIDU | M | 30 | - | | - |
| (6) | R. Pavitra. | F | 9 | | | - |

2. Social Status details:

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

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 3 Oxen NO Buffaloes NO Sheep/Goats NO.

(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: 8297584650

(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) street lights

(ii) water

(iii)

Place: conaly streets

Date:

V. Anjali
Signature of the Student

D-Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : V. Anjali
Group : B2C
Registration Number : D. Ravi 2222001049088

Area of the Survey conducted:

| | | | | | |
|-------------|---------------|---------------|---------------|-------------------------|---------------|
| House No. | 1-219 | Habitat /Ward | chittaripuram | Panchayat /Municipality | chittaripuram |
| Post office | chittaripuram | Mandal | santhakaviti | District | Vizayanagara |

1. Household Details:

| S.No. | Name of the Person | Gender M/F | Age | Education | Profession/ Employment . | Income (Daily wage/Weekly/ Monthly) |
|-------|--------------------|------------|-----|-----------|--------------------------|-------------------------------------|
| 1. | M. Mukhalingam | M | 50 | Under | lorry driver | 8000 |
| 2. | M. kalavathi | F | 46 | - | Housewife | - |
| 3. | M. Pavani | F | 18 | Degree | student | - |
| 4. | M. Sumanth | M | 15 | 10th | student | - |
| | | | | | | |
| | | | | | | |

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Rajak (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: _____ Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO

(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: NO ✓

(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: 8297584650 ✓

(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) water

(ii) street light

(iii)

Place:

Date:

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor





AWARENESS REPORT:

PROBLEMS IDENTIFIED

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

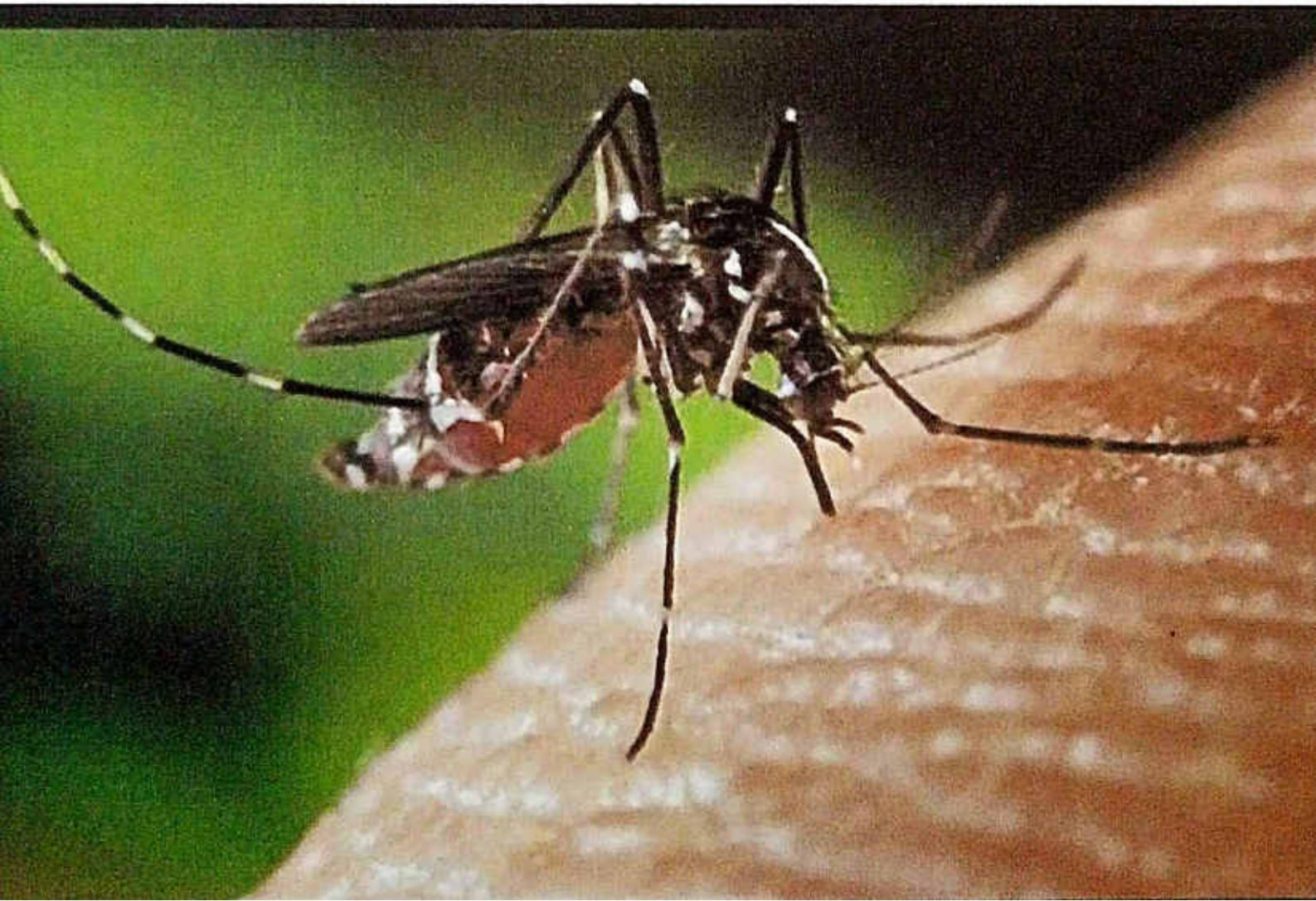
EFFECTS FACED BY PEOPLE

- * 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 neetly.

BY: ~~A AKHILA~~
V. Anjali





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



Name of the student : V. Anjali
Group : CBZ
Name of the mentor : D. Ravindra sir
Name of the project : food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| SC-216 | vada. Rupa | chittaripuram | southakaviti | Vizianagaram |

- 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 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
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?
 fruits, sweets
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 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

V. Anjali
 Signature of the Student

D. Ray
 Signature of the Mentor



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



Name of the student : V. Anjali
Group : BZC
Name of the mentor : D. Ravindra sir
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 1-217 | S. Krishana | chittavipuram | sandhakaviti | vizianogaram |

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?

NO

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?

Milk, fruits

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

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra Sir
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 3-21 | K. Simachalam | Chittaripuram | southakaviti | Vizayanagara |

- 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 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

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?

Fruits, Milk

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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

Name of the student : V. Anjali
Group : BZC
Name of the mentor : D. Pavindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|-------------|--------------|
| 1-219 | M. Pavani | chittaripuram | saulakaviti | Vizianagaram |

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?

NO

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?

Fruits , Rice

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|----------------|--------------|
| 1-301 | Hymavathi | Chittavipuram | Soubhakaraviti | Vizianagaram |

- 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 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

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?
milk, fast 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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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

Name of the student : V. Anjali
Group : BZC
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|------------|
| 2-202 | D. Bhavathi | Chittaripuram | Santhakaviti | Vilaspuram |

- 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

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?

Fruits, junk foods

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

V. Ajali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : BZC
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 2-203 | K. Laxmi | Chittaripuram | Southakuliti | Vizianagaram |

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?
NO

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?
fruits, egg, 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

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

V. Anjali
Signature of the Student

D. Roy
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits.

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 2-13 | K. Koteswararao | Chittaripuram | Santhakaviti | Vizayanagara |

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?

NO

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?

fruits

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

V. Anjali

Signature of the Student

D. Ray

Signature of the Mentor



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



Name of the student : V. Anjali
Group : B7C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|------------------------------|--------------|--------------|
| 1-218 | N. Jyothi | southakaviti chittarpuram | southakaviti | Vizianagaram |

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?
NO

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?
fruits

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

V. Anjali
Signature of the Student

D. Ravi
Signature of the Mentor



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



Name of the student : V. Anjali
Group : BZC
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 1-14-3 | P. Laxmi | chittanipuram | southakaviti | Vizayanagara |

- 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

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?

NO

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?

fruits

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

v. Anjali
Signature of the Student

D. Rollu
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 1-12-2 | Yana Devi | chittaripuram | sandhakaviti | vizayanagara |

- 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

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?

NO

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?

Fruits

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

V. Singh
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|---------------|
| 3-12 | K. Raghu | chittaripuram | southakaviti | Vizalavogitam |

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?

NO

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?

fruits, milk

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 2-37 | GI - sravani | chittaripuram | santhakaviti | vizianagaram |

- 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

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?
fruits, Milk

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

V. Anjali
Signature of the Student

D. Ravi
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 1-31 | R- Anusha | Chittaripuram | southakaviti | Vizianagaram |

1. How many times a day do you eat?
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?

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?
NO

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?
Fruits,

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B7C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 2-206 | K. Nukamma | Chittavipuram | Santhakavi E | Vizayanagara |

- 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

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?
fruits

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 2-204 | G. Ravanamma | chittaripuram | santhokaviti | Vizayanagara |

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?

NO

12. Have you 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?

Fruits, Fastfood

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|-------------|--------------|
| 52 | G. Varaja | sadbakaviti | sadbakaviti | Vizianagaram |

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?

NO

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?

Egg, fast 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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B7C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 3-46 | N. Manikyan | Chittavipuram | southakaviti | Vizayanagara |

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?

NO

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?

Milk, Junkfood

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B7C
Name of the mentor : D. Ravindra
Name of the project : food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 2-4 | L. NAGAMMA | chittaripuram | santhakaviti | vizianagaram |

- 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

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?

fruits, milk, fast 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

v. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 1-86 | B. Ramanamma | Chittaripuram | Sankhavariti | Vizianagaram |

- How many times a day do you eat?
3 times
- 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.
- What meal would you consider to be your main meal of the day?
 - a. Breakfast
 - ~~b.~~ lunch
 - c. dinner
 - d. others
- What does your main meal consist of and how it is prepared?
 - ~~a.~~ Freshly prepared.
 - B. restaurant meal.
 - C. precooked microwave.
 - D. other
- Have you been avoiding some foods for health reasons? Yes / No ✓
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

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?

fruits, milk

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

V. Anjali

Signature of the Student

D. Ray

Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 3-21 | K. Muni | Chittaripuram | southakaviti | Vizianagaram |

- 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 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

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?
vegetable, fast foods

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|-------------|--------------|
| 1-15 | R. Kaudharo | Chittooripuram | Southakolli | Vizianagaram |

- 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

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?
NO

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?
fruits , fast foods

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. Ravincha
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|------------|--------------|
| 1-36 | B. Rajarao | Chittaripuram | santhakavi | Vizayanagara |

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?
NO

12. Have you 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?

Milk, Fastfood

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

V. Anjali
Signature of the Student

D. Ray
Signature of the Mentor



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



Name of the student : V. Anjali
Group : B2C
Name of the mentor : D. pavindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|--------------|--------------|
| 1-18 | M. Narasamma | chittanipuram | sandhakaviti | Vizianagaram |

- 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:

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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

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?

fruits, leaf vegetables

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

V. Anjali

Signature of the Student

D. Ray

Signature of the Mentor



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



Name of the student : V. Anjali
Group : B7C
Name of the mentor : D. Ravindra
Name of the project : Food habits

| House No | Name of the person | Village / Ward | Mandal | District |
|----------|--------------------|----------------|------------|--------------|
| 3-21 | K. Janaki | Chittanipuram | Santhabati | Vizianagaram |

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.

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

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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

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?

Milk, fast 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

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

V. Anjali

Signature of the Student

D-Roy

Signature of the Mentor



CONCLUSION

I'm v Anjali 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

vada Anjali

Verified by
D. Rawal
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