

A PROJECT ON COMMUNITY SERVICE

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

By

PEDADA PAVITRA

2222001049065

Semester 2(BZC)

Batch 2022-2025

Under the supervision

G.Ramakrishna Rao

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 G.Ramakrishna Rao 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 Pedada Pavitra studying Bsc Cbz 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

G. Ramakrishna Rao

Lecturer in Botany

GDC(M), Srikakulam

DECLARATION

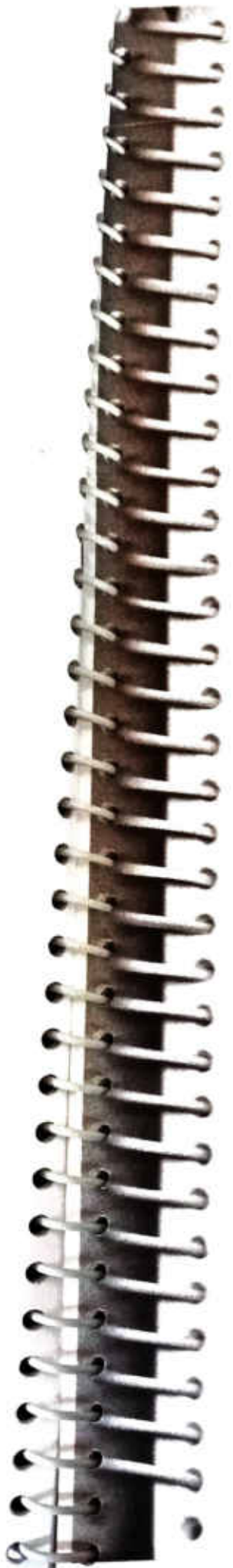
I hereby declare that the Community Service Project report entitled "FOOD HABITS" submitted by me to the Govt. Degree College(M),Srikakulam in partial fulfilment of the requirement for the award of the degree of Bsc Cbz is a record of bonified project work carried out by me under the guidance of G.Ramakrishna Rao 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:



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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.

OBJECTIVE

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

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

METHODOLOGY

1. Study site:

The place selected for the project was comes under 8th ward dusipeta village, Amadalavalasa mandal and Srikakulam 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 : P. Pavithra

Group : C.B.7

Registration Number : 2222001042065

Name of the Mentor : G. Ramakrishna Rao Sir

Name of the Project : Food habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
09/5/23 Tuesday	Socio - Economic survey	06	P. Pavithra
10/5/23 Wednesday	Socio - Economic survey	07	P. Pavithra
11/5/23 Thursday	Socio - Economic survey	04	P. Pavithra
12/5/2023 Friday	Socio - Economic survey	07	P. Pavithra
13/5/2023 Saturday	Socio - Economic survey	06	P. Pavithra
14/5/2023 Sunday	Socio - Economic survey	07	P. Pavithra
15/5/2023 Monday	Socio - Economic survey	05	P. Pavithra
16/5/2023 Tuesday	Socio - Economic survey	06	P. Pavithra



Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Pavithra

Group : C.B.E

Registration Number : 9999 001049065

Name of the Mentor : G. Ramakrishna Rao Sir

Name of the Project : Food Habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
17/1/23 Wednesday	Awareness Programme	02	P. Pavithra
18/1/2023 Thursday	Awareness Programme	03	P. Pavithra
19/1/23 Friday	Awareness Programme	06	P. Pavithra

Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Pavithra

Group : CBt

Registration Number : 2222001049065

Name of the Mentor : G. Ramakrishna Rao Sir

Name of the Project : Food Habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
20/05/23 Saturday	Food Habits	04	P. Pavithra
21/05/23 Sunday	Food Habits	06	P. Pavithra
22/05/2023 Monday	Food Habits	06	P. Pavithra
23/05/2023 Tuesday	Food Habits	07	P. Pavithra
24/05/2023 Wednesday	Food Habits	06	P. Pavithra
25/05/2023 Thursday	Food Habits	05	P. Pavithra
26/05/2023 Friday	Food Habits	07	P. Pavithra
27/05/2023 Saturday	Food Habits	04	P. Pavithra
28/05/2023 Sunday	Food Habits	06	P. Pavithra



Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Pavithra
 Group : C.B.t
 Registration Number : 2222001049065
 Name of the Mentor : G. Ramakrishna Rao sir
 Name of the Project :

Date & Day	Activity done	Number of Hours Spent	Signature of the student
24/5/2023 Monday	Project writing	10	P. Pavithra
30/05/23 Tuesday	Project writing	10	P. Pavithra
31/5/23 Wednesday	Project writing	05	P. Pavithra
1/6/2023 Thursday	Project writing	04	P. Pavithra
2/6/2023 Friday	Project writing	04	P. Pavithra
3/6/2023 Saturday	Project writing	07	P. Pavithra
4/6/2023 Sunday	Project writing	02	P. Pavithra
5/6/2023 Monday	Project writing	02	P. Pavithra
6/6/2023 Tuesday	Project writing	04	P. Pavithra
7/6/2023 Wednesday	Project writing	05	P. Pavithra


 Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO-ECONOMIC SURVEY

Name of the Student : P. Pavithra
Group : C.B-7
Registration Number : 2222001040065
Area of the Survey conducted: Alludhu Alludu

House No.	0-04	Habitat /Ward	colony	Panchayat /Municipality	Alludhu
Post office	Alludhu	Mandal	Srinukabati	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1	M. Pramu	M	36	—	Labour	
2	M. Gireetha	F	30	—	Housewife	
3	M. Bindhu	F	16	Inter		20,000/-
4	M. Swathi	F	14	ath		

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family: ☒

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ☒

(ii) Do you have Mobile: Yes ☒

(iii) Mobile Number: 9989041163

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

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

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

(i) —

(ii) —

(iii) —

Place: Kelawadurga

Date: 9/5/2023

P. Dew. Hing
Signature of the Student

Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Pavithra

Group : C.B.T

Registration Number : 2222001049065

Area of the Survey conducted: Food Hg Dusi Peta

House No.	3-27	Habitat /Ward	Colony	Panchayat /Municipality	Dusi Peta
Post office	Dusi	Mandal	Amalapuram	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	M. Chinnarasana	M	45	—	labour	
2	M. Redharawana	F	37	—	labour	1600
3	M. Shauji	F	19	inter		10,000/-
4	M. Pallavi	F	17	inter		

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mada (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 _____ Oxen _____ Buffaloes _____ Sheep/Goats _____

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

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

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

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

4. Health Details:

(i) Ailments in family: ✓

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 939 206 8854

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

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

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

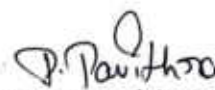
(i) —

(ii) —

(iii) —

Place: ~~Puducherry~~ Puducherry

Date: 9/5/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Padma

Group : C.B-2

Registration Number : G-~~Pamankrishna Rao~~ [2922001049065]

Area of the Survey conducted: ~~Do~~ chepenukela, G.K. ualora

House No.	1-206	Habitat /Ward	Colony	Panchayat /Municipality	G.K. ualora
Post office	guttavalli	Mandal	Amalapuram	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1	M. Ramu	M	39	—	labor	
2	M. Kalyani	F	32	—	labor	15,000/-
3	M. Parikumar	M	14	8th		
4	M. Rajeswar	F	12	inter		

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Madia (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 _____ Oxen _____ Buffaloes _____ Sheep/Goats _____

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

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

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

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

4. Health Details:

(i) Ailments in family: _____

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/~~No~~

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9391757275

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

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

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

(i) _____

(ii) _____

(iii) _____

Place: G. K. Vadara

Date: 9/5/2013

P. P. P. P.
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Paditha
Group : C.B.T
Registration Number : 2222001049065
Area of the Survey conducted: chepenupeeta

House No.	4-56	Habitat /Ward	colony	Panchayat /Municipality	Konapam
Post office	thuvakapeta	Mandal	Amalavasa	District	srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	Ch. Ramakrishna	M	40	-	Agriculture	
2	Ch. Lavanya	F	28	-	House wife	20,000/-
3	Ch. Jothidha	F	4	-		
4	Ch. Hanu'sini	F	3	-		

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: 805 Acres

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

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

(vii) 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 NO

(iii) Mobile Number:

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

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

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

(i) —

(ii) —

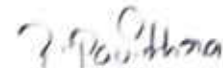
(iii) —

Place:

Cheruvuvela

Date:

10/5/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Ravithra

Group : C.B.T

Registration Number : 2222001049065

Area of the Survey conducted: Cherpunupeta

House No.	2-8	Habitat /Ward	Colony	Panchayat /Municipality	Koradam
Post office	Thurakapeta	Mandal	Amodalavalara	District	Sriakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	P. Ramanna	F	60	—	House wife	
2	P. Rajeswari	F	30	—	House wife	
3	P. Yashwanth	M	10	5th		8,000/-
4	P. Nanya	F	6			

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: _____ Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family: ✓

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes ~ U

(iii) Mobile Number:

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

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

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

(i) —

(ii) —

(iii) —

Place: chepenurata

Date: 10/5/2022

ch. Bharumath.
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Pavithra
Group : C.B.2
Registration Number : 2292001049065
Area of the Survey conducted: chepenapeta

House No.	4-60	Habitat /Ward	colony	Panchayat /Municipality	Kunapam
Post office	thunakapeta	Mandal	Amudalambra	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	P. Satya	M	60	—	Agriculture	
2	P. Pavana	F	52	—	house wife	10.00/-

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: _____ Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family: ✓

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes NO

(iii) Mobile Number:

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

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

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

(i) —

(ii) —

(iii) —

Place: chepenapeta

Date: 4/5/2023

S. P. P. Thota
Signature of the Student

Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Pavithra
Group : C.B.T
Registration Number : 9999 00104016
Area of the Survey conducted: chepenupeta

House No.	4-13	Habitat /Ward	colony	Panchayat /Municipality	Konapam
Post office	thunakapeta	Mandal	Amadalavalasa	District	Srikakulam.

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	ch. Upendra	M	48	—	Agriculture	} 30,000/-
2	ch. Uma	F	38	—	House wife	
3	ch. chinanjiu	M	23	Degree	job	

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: 3 Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes NO

(iii) Mobile Number:

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

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

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

(i) _____

(ii) _____

(iii) _____

Place:

Cheruvu

Date:

11/5/2023

P. Pavithra
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Pavithra

Group : C.B.T

Registration Number : 2292001049065

Area of the Survey conducted: chepenupeta

House No.	U-15	Habitat /Ward	Colony	Panchayat /Municipality	Kona Pam
Post office	thunakapeta	Mandal	Andalavudara	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	ch. kalaswari	M		10th	Agriculture	
2	ch. chinni	F		6th	House wife	15,000/-
3	ch. Rohith	M		5th		
4	ch. Vinila	F		9th		

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: 2 Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number:

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

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

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

(i)

(ii)

(iii)

Place: chepenapeta

Date: 11/5/2023

P. Pauthra
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Padma

Group : C.B.E

Registration Number : 2222001049065

Area of the Survey conducted: chepena Peta

House No.	2-5	Habitat /Ward	colony	Panchayat /Municipality	kunapam
Post office	thirukapeta	Mandal	Amalapuram	District	Srikakulam.

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	R. Raju	M	48	-	Agriculture	
2	R. Anena	F	30	-	House wife	
3	R. Kulas	M	13	8th		15,000/-
4	R. gowtham	M	10	6th		

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: _____ Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family: ✓

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 8919039419 ✓

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

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

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

(i) —

(ii) —

(iii) —

Place:

Cherpenapeta

Date:

12/5/2023

P. Paditha
Signature of the Student

Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : D. Pavithra
Group : B-2-C
Registration Number : 2222001049065
Area of the Survey conducted: Dusipeta

House No.	2-123	Habitat /Ward	S. colony	Panchayat /Municipality	Dusi Panchayat
Post office	Dusi - Post	Mandal	Amadalavalasa	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	A. Venkatakrishna Rao	M	35		Agriculture	} 20000/-
2	A. Janyanya	F	28		House wife	
3	A. Bhargava	F	12	school		
4	A. Jabbu	F	10	school		

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mola (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 30.5

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

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

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

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

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

4. Health Details:

(i) Ailments in family: _____

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9491106427

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

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

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

(i) _____

(ii) _____

(iii) _____

Place: Durlipeta

Date: 12/5/2023

P. Pavithra
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Pavithra

Group : C.B.7

Registration Number : 2222001049065

Area of the Survey conducted: Dusipeta

House No.	2.147	Habitat /Ward	S.C colony	Panchayat /Municipality	Dusi
Post office	Dusi	Mandal	Amadalavalasa	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1	A. Namasingam	M	47	10th	R.T.C	
2	A. Gnaniswami	F	35	10th	Housewife	30,000/-
3	A. Mauli	M	19	B.tech		
4	A. Vishnu	F	17	inter		

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mab (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 ___ 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 Pink ✓

(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: 9898588116

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

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

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

(i) _____

(ii) _____

(iii) _____

Place: Dusipeta

Date: 12/5/2023

Signature of the Student

Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRICALAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Palanichandran

Group : C.B.T

Registration Number : 222200104005

Area of the Survey conducted: Dindigul

House No.	4-120	Habitat / Ward	S. C. Colony	Panchayat / Municipality	Dindigul
Post office	Dindigul	Mandal	Ammapettai	District	Sri Kalakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1	A. Nageswaram	M	52	-	Agriculture	
2	A. Ramesh	F	46	-	Housewife	
3	A. Venkatesh	M	28	D.B.		4000/-
4	A. Lisha	F	25	Education		
				B.Tech		

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: Acres 20. sent

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

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

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

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

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

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9441939187

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

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

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

(i)

(ii)

(iii)

Place: Dusipeta

Date: 13/5/2023

P. Paul. Hra
Signature of the Student

Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Padma

Group : C.B.7

Registration Number : 222001049065

Area of the Survey conducted: Dusi Peta

House No.	2-122	Habitat /Ward	S. colonial	Panchayat /Municipality	Dusi
Post office	Dusi Post	Mandal	Anapalavaram	District	Sriakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
	A. Ramaswami	M	60			
	A. Arimma	F	50			
	A. Aradna	F	20	B. Tech		20,000/-

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: _____ Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family:

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

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9800387712

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

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

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

(i) —

(ii) —

(iii) —

Place: Dusi Betu

Date: 13/5/2023

P. P. H. H. H.
Signature of the Student

Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Pavithra

Group : C.B.7

Registration Number : 222200104065

Area of the Survey conducted: Dusipeta

House No.	1-275	Habitat /Ward	S-C colony	Panchayat /Municipality	Dusi
Post office	Dusi	Mandal	Amrithavaram	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	A. Ramarao	M	70		Agriculturer	
2	P. Laxmi	F	60		House wife	
3	P. Akkulu	M	30		Valentini	20,000/-

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: _____ Acres

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



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Paditha
Group : C.B.7
Registration Number : 222200104065
Area of the Survey conducted: Dusipeta

House No.	2-132	Habitat / Ward	S.C colony	Panchayat / Municipality	Dusi
Post office	Dusi Post	Mandal	Amalavaram	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	B. Sittamma	F	75	House wife		

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Reddy (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 _____ Oxen _____ Buffaloes _____ Sheep/Goats _____

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

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

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

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

4. Health Details:

(i) Ailments in family: ✓

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9943713495

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

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

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

(i)

(ii)

(iii)

Place: Duripeta

Date: 14/5/2023

P. Pavithra
Signature of the Student

Signature of the Mentor



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

Name of the Student : P. Parithina
Group : C.B-7
Registration Number : 22200104065
Area of the Survey conducted: Dusi Peta

House No.	2-137	Habitat /Ward	S.C colony	Panchayat /Municipality	Dusi
Post office	Dusi Post	Mandal	Amadalavalasa	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
	y. S. Purnanandh	F	60	illiterate		
	y. Ananthakrishna	M	35	inter 12th		2000/-

2. Social Status details:

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

3. Economic Status details:

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

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

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

(iv) Availability of Agricultural land: Yes/ No No

(v) Extent of Agricultural land: 0 Acres

(vi) Livestock resources: Cows 0 Oxen 0 Buffaloes 0 Sheep/Goats 0

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

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

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

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

4. Health Details:

(i) Allments in family:

(ii) Treatment in which Hospital: Govt/Private

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

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

(iv) Do you have Govt. Angan Sri Card? Yes/No

5. Other Details:

(i) Do you have TV? Yes/No

(ii) Do you have Mobile? Yes

(iii) Mobile Number: 90009534

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

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

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

(i) _____

(ii) _____

(iii) _____

Place: Sion, T-5

Date: 14/5/2023


Signature of the Student


Signature of the Mentor



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

Name of the Student : P. Ravithra
Group : C.B-2
Registration Number : 222200104065
Area of the Survey conducted: Dusi Petla

House No.	1-287	Habitat / Ward	S.C colony	Panchayat / Municipality	Dusi Petla
Post office	Dusi Petla	Mandal	Amalavaram	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1	K. Simbachalam	M	58		Agriculture	
2	K. Laxmi	F	45			
3	K. Manmadhavarao	M	20	10th		14,000/-
4	K. Laxmi	M	24	10th		
5	K. Papamma	F	75			

2. Social Status details:

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

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 8.5001

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



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Pavithra
Group : C.B.7
Registration Number : 2222001040065
Area of the Survey conducted: Dusipeta

House No.	1-307	Habitat /Ward	S.C colony	Panchayat /Municipality	Dusipeta
Post office	Dusi Post	Mandal	Amalapuram	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	D. chinnappa	M	60	-	Agriculture	
2	D. Jayalaxmi	F	40	-		
3	D. Rajamma	F	23	Degree		5,000/-

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: malam (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: 20 Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family: ✓

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details: ✓

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 7382048694

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

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

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

(i)

(ii)

(iii)

Place: Dusi Peta

Date: 15/5/2023

P. Pavithra
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Pav. Heman
Group : C.B.T (P)
Registration Number : 222260104065
Area of the Survey conducted: Dusipeta

House No.	1-276	Habitat /Ward	S.C colony	Panchayat /Municipality	Dusi, Peta
Post office	Dusi Post	Mandal	Amadalambam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	A. Trinatharam	M	50		Agriculture	
2	A. Ganamma	F	45			
3	A. Srinivasulu	M	30			15,000/-
4	A. Monica	F	23			

2. Social Status details:

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

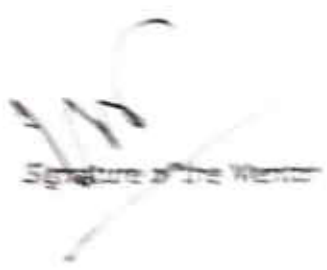
(vi) Livestock resources: Cows _____ Oxen _____ Buffaloes _____ Sheep/Goats _____

☐ Is the person a resident? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No

Name of the Person	Gender	Age	Status in Household

☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No
☐ Is the person a resident of the village? Yes/No

Name: _____
 Address: _____


 Signature of the Worker



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

Name of the Student : P. Pavithra
Group : B-2-C
Registration Number : 2222001049065
Area of the Survey conducted: Dusipeta

House No.	1-289	Habitat /Ward	S.C colony	Panchayat /Municipality	Dusi Peta
Post office	Dusi Post	Mandal	Amadalambam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1)	B. Prakash Rao	M	40	Deegree	2. P.H.S. Tuni	
2)	B. Pratyathi	F	35	Housewife		
3)	B. Sai Bhargava	M	15			varied
4)	B. Sai Phani Kumar	M	13			
5)	B. Ratnaamma	F	60			

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: _____ Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family: ✓

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

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9492534031 ✓

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

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

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

(i)

(ii)

(iii)

Place: Dusiwela

Date: 15/5/2021

P. Paulthra
Signature of the Student

MO

Signature of the Mentor



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

Name of the Student : P. Poulthana
Group : C.B.E
Registration Number : 2222001049065
Area of the Survey conducted: Dusi Peta

House No.	2-1001	Habitat /Ward	SC colony	Panchayat /Municipality	Dusi Peta
Post office	Dusi Post	Mandal	Amalavaram	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	K. Rama Rao	M	50	Qnten	Agriculture	
2	K. Umaganeswari	F	40	degree	Housewife	
3	K. Praveen Kumar	M	26	degree		20000
4	K. Deepthi	F	19	polytechnic		

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mda (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 ☒ Oxen _____ Buffaloes _____ Sheep/Goats _____



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

Name of the Student : P. Pavithra
Group : C.B.E
Registration Number : 222200104065
Area of the Survey conducted: Dusipeta

House No.	2-1111	Habitat /Ward	SC colony	Panchayat /Municipality	Dusi Peta
Post office	Dusi Post	Mandal	Amalavandana	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	K. Ram Babu	M	70	Qnten	Agriculture	
2	K. Umaganeswari	F	40	degree	housewife	
3	K. Praveen Kumar	M	26	degree		20000
4	K. Deepthi	F	19	polytechnic		

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: _____ Acres

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

vi) Do you have own toilet? Yes/No

vii) Type Cooking fuel used: ☒ Kerosene ☐ Wood/ others specify _____

ix) Do you have white ration card? Yes/No

ix) 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

ix) Do you have Govt. Anganwadi Centre? Yes/No

5. Other Details:

i) Do you have TV? Yes/No

ii) Do you have Mobile? Yes

iii) Mobile Number: ~~2551 0140318453~~ / 8455102803

iv) Do you have Computer/Laptop? Yes/No

v) Is internet available at home? Yes/No

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

i) _____

ii) _____

iii) _____

Place: 705, 76-3

Date: 16/5/2023

705, 4-01
Signature of the Student


Signature of the Mentor



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

Name of the Student : P. Pavithra
Group : C.B.2
Registration Number : 2222001049065
Area of the Survey conducted: Dusipeta

House No.	1-290	Habitat /Ward	S.C colony	Panchayat /Municipality	Dusi Peta
Post office	Dusi Post	Mandal	Amadalavalasa	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1)	P. Vannabamma	F	61	-	Housewife	2,500/-

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: _____ Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family:

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

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes NO

(iii) Mobile Number: NO

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

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

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

(i)

(ii)

(iii)

Place: Dusipeta

Date: 6/5/2023

P. Pawithra
Signature of the Student


Signature of the Mentor



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

Name of the Student : P. Pavithra
Group : C.B.7
Registration Number : 2222001049065
Area of the Survey conducted: Dusipeta

House No.	1-290	Habitat /Ward	S.C colony	Panchayat /Municipality	Dusipeta
Post office	Dusi Post	Mandal	Amadalavalasa	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment .	Income (Daily wage/Weekly/ Monthly)
1	P. Sunibaby	M	47		Agriculture	
2	P. Bharathi	F	34			
3	P. Shengitha kumar	M	13	Primary school		Direct
4	P. Nikhil kumar	M	11	Primary school		

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mada (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 _____ Oxen _____ Buffaloes _____ Sheep/Goats _____

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

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

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

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

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9494287498

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

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

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

(i)

(ii)

(iii)

Place:

Dusipeta

Date:

16/5/2023

Signature of the Student

Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : D. Jayashree

Group : CSE

Registration Number : 2222001042005

Area of the Survey conducted : D. Jayashree

House No.	2-126	Habitat / Ward	S. Jayashree	Panchayat / Municipality	D. Jayashree
Post office	D. Jayashree	Mandal	Amalapuram	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession / Employment	Income (Daily wage Weekly Monthly)
1	D. Jayashree	M	21		Aggravated	
2	D. Jayashree	F	45			

2. Social Status details:

(i) Community: SC/ST/BCA-S-C-D/OC (ii) Sub-Caste: Kuchela (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: Cattle _____ Sheep/Goats _____

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

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

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

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

4. Health Details:

(i) Ailments in family: ✓

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number:

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

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

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

(i)

(ii)

(iii)

Place: Duniweta

Date: 12/5/2023

P. Paulina
Signature of the Student


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~~

P. Pavithra





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



Name of the student : P. Poojitha
Group : C.B. 2
Name of the mentor : G. Ramakrishna Sin
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
u-56	Ch. Lavanya	Chepenupeeta	Amadalavalasa	Srikakulam

1. How many times a day do you eat?

3

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?

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?

fast food, 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

P. Parithina
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B.T
Name of the mentor : G. Ramakrishna Sin
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
4-Gu	ch. cholanayya	chepenupeeta	Amadalavalasa	srikakulam

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?
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?

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?

best food, oil 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

P. Ravithra

Signature of the Student



Signature of the Mentor



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



Name of the student : P. Padithna
Group : C.B.t
Name of the mentor : G. Ramakrishna Srin
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
2-8	P. Anuna	Cheruvueta	Amadalavalasa	Srikakulam

1. How many times a day do you eat?

3

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?

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?

vegetables, 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 ☐

P. Paritha

Signature of the Student



Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B.T
Name of the mentor : 222200104065
Name of the project : chepenupeta

House No	Name of the person	Village / Ward	Mandal	District
4-60	P. Ravanamma	chepenupeta	Amadalavalasa	Srikakulam

1. How many times a day do you eat?

3

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?

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?

vegetables and fruits, oil food and 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

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

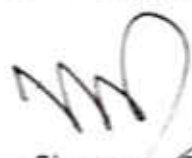
Weight

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

Mental condition

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

P. Pawtho
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B.2
Name of the mentor : G. Ramakrishna Srin
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
4-13	Ch. Uma	Chencapeto	Amalavada	Srikakulam

- How many times a day do you eat?
- 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?

—

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?

1) Leaf vegetables
2) 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

P. Paothong

Signature of the Student



Signature of the Mentor



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



Name of the student : P. Radhika
Group : CB +
Name of the mentor : G. Ramakrishna Sin
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
4-15	ch. koteswara Rao	chepenapeta	Amedaabad	Srikakulam

1. How many times a day do you eat?

3

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?

-

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?

vegetables, fruits, 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

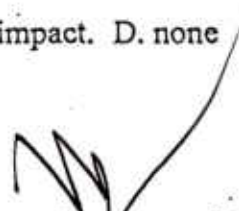
Weight.

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

Mental condition.

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

P. Pavithra
Signature of the Student


Signature of the Mentor



GOVT. IMPROVE AND ENHANCE SRIKANTHAM
COMMUNITY SERVICE PROJECT
PROJECT PARAMETERS



Name of the system

1. 1/10/2021

Group

1. 1/10/2021

Name of the member

1. 1/10/2021

Name of the project

1. 1/10/2021

Sl. No.	Name of the person	Village Ward	Mandal	District
1	1. 1/10/2021	1. 1/10/2021	1. 1/10/2021	1. 1/10/2021

1. How many times a day do you eat?

3

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 daily 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. prepacked 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?

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, food. part.

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

P. Parithina
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Pruthi
Group : C.B.T
Name of the mentor : G. Ramakrishna S.N.
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
2-123	A. Lavanya	Duripeta	Amalapuram	Srikakulam

1. How many times a day do you eat?

3

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?

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

20

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

1) Leaf vegetables 2) Fruit food
2) Beans

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

Restful sleep

a. No impact.

E. little impact

c. big impact. D. none

Health

d. No impact.

B. little impact

c. big impact. D. none

Weight.

a. No impact.

☒ D. little impact

c. big impact. D. none

Mental condition.

A. No impact.

B. little impact

c. big impact. D. none

P. Pavithra
Signature of the Student

Signature of the Mentor



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



Name of the student : P. Peridhara
Group : C.B.T
Name of the mentor : G. Ramakrishna Sin
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-276	A. Gnanamma	Dusipeta	Amadalavalasa	Srikakulam

1. How many times a day do you eat?

3

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 ☐

Handwritten notes on the left page, including several lines of text and a small diagram or sketch.

Handwritten notes on the left page, including several lines of text and a small diagram or sketch.

Handwritten notes on the right page, including several lines of text and a small diagram or sketch.

Handwritten notes on the right page, including several lines of text and a small diagram or sketch.



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



Name of the student : P. Pavithra
Group : C.B-7
Name of the mentor : G. Ganakrishna Srin
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
2-147	A. Mauli	Dusipeta	Amadalavalara	Sriakulam

1. How many times a day do you eat?

3

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?

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?

vegetables and fruits, oil food

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

Restful sleep

☒ No impact.

☒ B. little impact

☐ c. big impact. ☐ D. none

Health

☒ No impact.

☒ B. little impact

☐ c. big impact. ☐ D. none

Weight.

☒ No impact.

☒ B. little impact

☐ c. big impact. ☐ D. none

Mental condition.

☒ A. No impact.

☒ B. little impact

☐ c. big impact. ☐ D. none

P. Pav. Thara

Signature of the Student



Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B.T
Name of the mentor : G. Ramakrishna D.S.
Name of the project : Food Habit

House No	Name of the person	Village / Ward	Mandal	District
1-120	A. Rajeswar:	Dusi Peta	Amadalavalasa	Srikakulam

1. How many times a day do you eat?

3

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?

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?

vegetables fruits, oil food 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 ☒ 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 ☐

P. Ravithra

Signature of the Student



Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B-7
Name of the mentor : G. Ramakrishna Sin
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
2-122	A. Asijamma	Dusipeta	Kamadavala	Srikakulam

1. How many times a day do you eat?

3
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?

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?

fast food, oil food

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

Restful sleep

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

Health

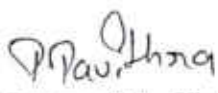
a. No impact. B. little impact c. big impact. D. none

Weight.

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

Mental condition.

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


Signature of the Student


Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B.2
Name of the mentor : G. Ramakrishna Sin
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-275	A. Laxmi	Dusipeta	Amudalavudasa	Srikakulam

- How many times a day do you eat?
- 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 ✓ b. lunch c. dinner d. others
- What does your main meal consist of and how it is prepared?
 - Freshly prepared. ✓ B. restaurant meal. C. precooked microwave. D. other
- Have you been avoiding some foods for health reasons? Yes / No ✓
- Do you have any particular food allergies?

- 20
- 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?

—

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, vegetables. 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

P. Pavithra
Signature of the Student

Signature of the Mentor



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



Name of the student : P. Padma
Group : C.B-1
Name of the mentor : G. Ramakrishna Srin
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
2-132	B. Sitamma	Duripeta	Amalavaram	Srikakulam

- How many times a day do you eat?
3
- 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?

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, egg. Fat food 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

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

P. Pav. Hing

Signature of the Student

NO

Signature of the Mentor



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



Name of the student : *S. Sridhar*
Group : *C.B-1*
Name of the mentor : *Mr. Ramakrishna Vin*
Name of the project : *Food habits*

House No	Name of the person	Village / Ward	Mandal	District
<i>2-144</i>	<i>K. Deepthi</i>	<i>Duzipeta</i>	<i>Amalavandara</i>	<i>Srikakulam</i>

- How many times a day do you eat?
- 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?

- 20
- 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?

-

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, vegetables. fast food, butter 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.

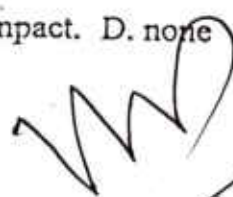
A. No impact.

B. little impact

c. big impact. D. none

D. Pavithra

Signature of the Student



Signature of the Mentor

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?

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?

vegetables, ~~fruits~~ fruits. oil food, 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

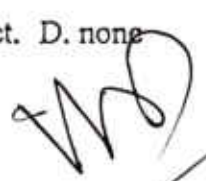
Weight.

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

Mental condition.

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

Pavithra
e of the Student


Signature of the Mentor



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



Name of the student : D. Pavithra
Group : C.B-7
Name of the mentor : G. Ramakrishna
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-290	R. Bharathi	Puribeta	Amadalavalam	Sriakulam

- How many times a day do you eat?
3
- 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?

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?

vegetables, fruits, oil food butter 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 ☐ 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

P. Pab. Hina
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Pauthra
Group : C.B.T
Name of the mentor : G. Ramakrishna S/S
Name of the project : Food habit

House No	Name of the person	Village / Ward	Mandal	District
2-126	D. Jayaram	Duripeta	Amadalavalasa	Srikakulam

- How many times a day do you eat?
 - 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?
- 20
- 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?

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?

Vegetables, 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

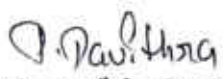
~~a.~~ No impact. ~~B.~~ little impact c. big impact. D. none

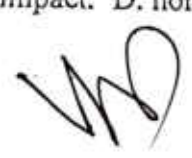
Weight.

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

Mental condition.

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


Signature of the Student


Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B.2
Name of the mentor : G. Ramakrishna Sir
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-307	D. Chinmoyao	Dusipeta	Amadalavalam	Srikakulam.

1. How many times a day do you eat?

3

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 ☐



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



Name of the student : P. Pavithra
Group : C.B.T
Name of the mentor : Gr. Ramakrishna Sir
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1- 287	K. Laxmi	Duripeta	Amadalavalasa	Sri. Venkateswara

1. How many times a day do you eat?

3

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?

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

NO

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

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

D. Paulina

Signature of the Student

Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B.T
Name of the mentor : G. Ramakrishna Sir
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
2-137	Y. Purnavathi	Dusipeta	Amalavasa	Srikakulam

1. How many times a day do you eat?

3

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?

Fish

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?

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

NO

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

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Pavithra
Signature of the Student


Signature of the Mentor



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



Name of the student : D. Pavithra
Group : C.B.T
Name of the mentor : G. Ramakrishna Sin
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
1- 289	B. Ratnaamma	Duripeta	Amadalavalasa	Srikakulam

- How many times a day do you eat?
3
 - 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?
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?

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

no

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

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Puthan
Signature of the Student

Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B.T
Name of the mentor : G. Ramakrishna Rao S'n
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
1-206	L.M. Ramu	G.K. Udasa	Amalapuram	Srikakulam

1. How many times a day do you eat?

3
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?

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?

Food ~~Habit~~, oil 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

P. Pandey

Signature of the Student

M

Signature of the Mentor



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



Name of the student : P. Pavithra
Group : C.B-2
Name of the mentor : G. Ramakrishna Rao
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
3-29	M. Peddaramana	D. Bhalapeta	Sarubojjili	Srikakulam

1. How many times a day do you eat?

3

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?

—

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?

vegetables, 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

P. Pavithran

Signature of the Student


Signature of the Mentor



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



Name of the student : P. Pawithra
Group : C.B. 7
Name of the mentor : G. Ramakrishna Rao
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
1-273	K. Annapurna	Ch. Hrududivalasa	Vinagottam	Ponnathi Puram

- How many times a day do you eat?
3
- 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?

—

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?

1) 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

P. Pawithra
Signature of the Student


Signature of the Mentor



CONCLUSION

I'm P.Pavitra studying in BSc first year Bzc 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

PedadaPavitra