

COMMUNITY SERVICE
PROJECT

Submitted in the partial fulfillment of the requirements for the award of
B.Sc Degree.

By

PAIDI PRASANNA RANI

2222001049059

Semester 2 (BZC)

Batch 2022-25

Under the Supervision

G.RAMAKRISHNARAO

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 this Community Service Project. Special thanks to Mentor G.RAMAKRISHNARAO Sir who help me in stimulating suggestions and encouragement to complete this project.

I would like to thank all the staff from the department of 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 **P PRASANNA RANI** studying BSc CBZ group has completed and submitted the project report on "FOOD HABITS" further partial fulfilment of the requirements for the award of Batchelor of Science under my supervision during the academic year 2022-25.

Date:

Place: Singuru .

project guide

G.RAMAKRISHNARAO

Lecturer in Botany

GDC(M), Srikakulam

DECLARATION

I hereby declare that the community service report entitled "FOOD HABITS" Submitted by me to the Govt. Degree College (M), Srikakulam in partial fulfillment of the requirement for the award of BSc CBZ is a record of bonified project work carried out by me under the guidance of G. RAMAKRISHNARAO 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 of University.

Srikakulam

Date

Signature of the candidate

Name: P. Prasanna Rani

CONTENTS

- 1.Introduction
- 2.Objectives
- 3.Methodology
- 4.Log book
- 5.Socio-economic survey
Report-Pics
- 6.Awareness program
- 7.Project
- 8.Conclusion

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 Singooru Village, Ponduru Mandal and Srikakulam Dist. Approximately 25 families were covered under this Village. This is a rural area with 75% of people were farmers. This area is used for cultivation of vegetables.

2. Quantitative study :

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

3. Qualitative study:

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

4. Data Collection :

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

Secondaly their food data was collected from the initially prepared questionnaire which consists of 14 questions to know about their food 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. Prasanna Rani

Group : B.Sc (C.B.Z)

Registration Number : 2222001049059

Name of the Mentor : G. Rama Krishna sir

Name of the Project : Food habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
9-05-2023 Tuesday	Socio - Economic survey	5	P. Prasanna Rani
10-05-2023 Wednesday	Socio - Economic survey	6	P. Prasanna Rani
11-05-2023 Thursday	Socio - Economic survey	5	P. Prasanna Rani
12-05-2023 Friday	Socio - Economic survey	9	P. Prasanna Rani
13-05-2023 Saturday	Socio - Economic survey	5	P. Prasanna Rani
14-05-2023 Sunday	Socio - Economic survey	6	P. Prasanna Rani
15-05-2023 Monday	Socio - Economic survey	7	P. Prasanna Rani
16-05-2023 Tuesday	Socio - Economic survey	6	P. Prasanna Rani


Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Prasanna Rani

Group : B.Sc (B.E.C)

Registration Number : 2222001049059

Name of the Mentor : Gr. Rama Krishna sir

Name of the Project : Food habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
20.05.2023 Saturday	food habits	8	P. Prasanna Rani
21.05.2023 Sunday	food habits	6	P. Prasanna Rani
22.05.2023 Monday	food habits	5	P. Prasanna Rani
23.05.2023 Tuesday	food habits	6	P. Prasanna Rani
24.05.2023 Wednesday	food habits	7	P. Prasanna Rani
25.05.2023 Thursday	food habits	5	P. Prasanna Rani
26.05.2023 Friday	food habits	6	P. Prasanna Rani
27.05.2023 Saturday	food habits	5	P. Prasanna Rani
28.05.2023 Sunday	food habits	6	P. Prasanna Rani

Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Prasanna Bui
 Group : B.Sc (C.B.E)
 Registration Number : 2222001049059
 Name of the Mentor : G. Rama Krishna sir
 Name of the Project : Food habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
29.05.2023 Monday	Project writing	9	P. Prasanna <u>Bui</u>
30.05.2023 Tuesday	Project writing	11	P. Prasanna <u>Bui</u>
31.05.2023 Wednesday	Project writing	10	P. Prasanna <u>Bui</u>
1.06.2023 Thursday	Project writing	5	P. Prasanna <u>Pani</u>
2.06.2023 Friday	Project writing	6	P. Prasanna <u>Bui</u>
3.06.2023 Saturday	Project writing	5	P. Prasanna <u>Bui</u>
4.06.2023 Sunday	Project writing	11	P. Prasanna <u>Bui</u>
5.06.2023 Monday	Project writing	10	P. Prasanna <u>Bui</u>
6.06.2023 Tuesday	Project writing	9	P. Prasanna <u>Bui</u>
7.06.2023 Wednesday	Project writing	11	P. Prasanna <u>Bui</u>


 Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna rani

Group : C.B.E (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	3-26	Habitat /Ward	Singuru	Panchayat /Municipality	Accipolavolasa
Post office	kinthari	Mandal	Ponduru	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. chandramani	male	51	inter	farmer	} 6,0000 }
2	P. sarasini	female	45	-	House wife	
3	P. vasu	male	29	degree	-	
4	P. Prameela	female	25	degree	-	

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family: —

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 8117557372

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

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

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

(i) water Problem

(ii)

(iii)

Place: Singuru

Date: 9/05/2023

P. Prasanna Raj
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna rani

Group : C.B.Z (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	3-25	Habitat /Ward	singuru	Panchayat /Municipality	Accipolavaiasa
Post office	Kiothai	Mandal	Ponduru	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. Ramanna	male	51	-	farmer	} 60,000 }
2.	B. Vanisri	Female	42	10th	House wife	
3.	B. Ramya	Female	23	Nursing	Educated	
4.	B. Urmila	Female	18	degree	Educated	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kalinga (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 2 Buffaloes _____ Sheep/Goats _____

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

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

(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: 9848439665

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

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

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

(i) water problem

(ii)

(iii)

Place: Singuru

Date: 9/05/2023

P. Prasann Rani
Signature of the Student

Am
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna rani

Group : C.B.Z (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	3-26	Habitat /Ward	Singuru	Panchayat /Municipality	Accipolavaiasa
Post office	Kinthari	Mandal	Ponduru	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. Ramana murthi	male	53	-	farmer	{ 45,000 }
2.	M. Vijayasri	Female	42	-	farmer	
3.	M. Ganesan Rao	male	30		software	

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

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

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

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

(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: 9876543210

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

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

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

(i) water problem

(ii)

(iii)

Place: singuru.

Date: 9/05/2023

P. Prasanna
Signature of the Student

ms
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Rani

Group : C.B.E (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	2-27	Habitat /Ward	Singuru	Panchayat /Municipality	Arripolavaiyasa
Post office	Kinthan	Mandal	Barduru	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. Hymavathi	Female	60	10th	Farmer	55,000
2.	P. Sathakam	Female	43	B.tech	Educated	
3.	P. Seetha	Female	39	Degree	"	
4.	P. Aswini	Female	19	Nursing	"	

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: Kalinga (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: 500 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 LPG

(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: 9381299714

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

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

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

(i) Road Problem


(ii)

(iii)

Place: Singur

Date: 10/05/2023

P. Prasanna Rani
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna rani

Group : C.B.T (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	3-28	Habitat /Ward	Singuru	Panchayat /Municipality	Accipolavala
Post office	Kinthari	Mandal	Ponduru	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. Anairao	50	Male	-	farmer	{ 60,000 }
2	D. Lakshmi	43	Female	10th	farmer	
3	D. Sireesha	23	Female	Degree	-	
4	D. Anuradha	19	Female	Degree	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kalinga (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: 700 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 LPG

(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: 9154766076

(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) Drinage coater

(ii)

(iii)

Place: Singuru

Date: 10/05/2023

P. Prasanna Rani
Signature of the Student

Amo
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanra rani

Group : C.B.Z (B.Sc)

Registration Number : 2222001049059.

Area of the Survey conducted:

House No.	3-28	Habitat /Ward	singuru	Panchayat /Municipality	Accipolavalasa
Post office	Kirthai	Mandal	Panduru	District	SRIKAKULAM

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	S. Ramayao	male	49	-	Farmer	} 49,000 }
2.	S. Varalakshmi	Female	30	8th	House wife	
3.	S. Harika	Female	23	Politecnic	-	
4.	S. Jyothi	Female	18	Inter	-	

2. Social Status details:

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

(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: 8374263461

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

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

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

(i) water problem

(ii)

(iii)

Place: Singuru

Date: 10/05/2023

P. Prasanna Bai
Signature of the Student

M
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. prasanna rani

Group : C.B.7 (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	3-29	Habitat /Ward	Singuru	Panchayat /Municipality	Accipola Valasa
Post office	kinthali	Mandal	Ponduru	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. mohan rao	male	60	-	farmer	{ 60,000 }
2.	P. Prabhavathi	Female	53	-	farmer	
3.	P. laxman rao	male	48	inter -	-	
4.	P. Raga	male	45	10 th	-	
5.	P. Thansi	Female	30	degree	House wife	

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: SOC 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: 7989377840

(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) coater problem

(ii)

(iii)

Place: Singuru

Date: 11/05/2023

P. prasanna Rani
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Rani

Group : C.B.Z (B-3C)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	3-80	Habitat /Ward	Singuru	Panchayat /Municipality	Accipolavaiasa
Post office	Kothai	Mandal	Donduru	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Arundharangarao	male	48	10th	farmer	{ 50000 }
2.	Arundhavan	female	43	-	house wife	
3.	Aravathi	female	19	degree	-	
4.	Aravathi	female	17	10th	-	

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: kainga (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: 500 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 LPG

(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: 9652260491

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

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

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

(i) Drainage Problem

(ii)

(iii)

Place: Kinthai

Date: 11/05/2023

P. Prasanna Rani
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna rani

Group : C.B.Z (B.SC)

Registration Number : 22222001049059

Area of the Survey conducted:

House No.	8-21	Habitat /Ward	Singuru	Panchayat /Municipality	Arripolavala SA
Post office	Kinthari	Mandal	Parduru	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. Ramesh	male	29	Sotturpur	B.tech	{ 35,000 }
2.	B. Ramadevi	Female	30	Hous wife	-	
3.	B. mahit	male	12	5th	-	
4.	B. Rahit	male	10	4th	-	

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: karinga (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: 500 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 LPG.

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

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

4. Health Details:

(i) Ailments in family: —

(ii) Treatment in which Hospital: Govt/Private

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

S.No.	Name of the Person	Gender	Age	Nature of Disability
1)	Ramesh	male	39	Handicapature

(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: 7386648218

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

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

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

(i) water Problem

(ii)

(iii)

Place: Singuru

Date: 12/05/2023

P. Prasanna Rani
Signature of the Student



Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna rani

Group : C.B.T (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	3-22	Habitat /Ward	Singuru	Panchayat /Municipality	Accipolavala
Post office	Kinthali	Mandal	Ponduru	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	V. Ramana	male	53	8th Pass	farmer	} 45,000 }
2.	V. sridevi	Female	45	10th	House wife	
3.	V. chodrakala	Female	17	9th	-	
4.	V. Jhansi	Female	15	10th	-	

2. Social Status details:

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

(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: 9963912773

(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: Singuru

Date: 12/05/2023

P. Prasanna rani
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Rani

Group : C.B.E (B.Sc)

Registration Number : 2222001079059

Area of the Survey conducted:

House No.	3-34	Habitat /Ward	Singuru	Panchayat /Municipality	Accipolavallasa
Post office	Kinthali	Mandal	Panduru	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. Malleswarisudha	male	49	-	farmer	60,000
2.	P. Govindamma	female	43	7th	House wife	
3.	P. Urmila	female	18	Degree	-	
4.	P. Sai Suvarna	female	15	10th	-	

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

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

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

4. Health Details:

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

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

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

5. Other Details:

- (i) Do You have TV: Yes/No
- (ii) Do you have Mobile: Yes
- (iii) Mobile Number: 7981976742
- (iv) Do you have Computer/Laptop: Yes/No
- (v) Is internet available at home: Yes/No

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

- (i) water Problem
- (ii)
- (iii)

Place: singuru

Date: 13/05/2023

P. prasanna
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Rani

Group : C.B.Z (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	3-23	Habitat /Ward	Singuru	Panchayat /Municipality	Arripolavaiasa
Post office	Kimball	Mandal	Panduru	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. Ramana murthi	male	40	degree	farmer	452000
2)	B. Jhansi	female	33	inter	HOUSE WIFE	
3)	B. Praneeth	male	12	7th	-	
4)	B. Kanchana	female	8	3rd	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kalinga (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: 400 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: 6300787303

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

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

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

(i) Road Problem

(ii)

(iii)

Place: Singuru

Date: 13/05/2023

P. Prasanna
Signature of the Student



Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Varli

Group : C.B.2 (B.2)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	8-25	Habitat /Ward	Ringuru	Panchayat /Municipality	Accipolavata
Post office	Kothai	Mandal	Ponduru	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. Tejeswara Rao	male	50	-	Farmer	55,000
2.	P. Rajya Lakshmi	female	43	-	Housewife	
3.	P. Sathya	female	28	11T	-	
4.	P. Purna	female	23	Inter	-	

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

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

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

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

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

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

4. Health Details:

(i) Ailments in family: -

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 93 46145919

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

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

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

(i) Road Problem

(ii)

(iii)

Place: Singuru

Date: 14/05/2023

P. Prasanna
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Rani

Group : C.B.T (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	1-79	Habitat /Ward	Singuru/3	Panchayat /Municipality	Accipalavaiasa
Post office	Kinthai	Mandal	Poduru	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. Lakshmi	Female	50	-	Farmer	{ 90,000 }
2.	A. Sai Ram	male	28	inter	Farmer	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kainga (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: 800 Acres

(vi) Livestock resources: Cows 1 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: 8464000443

(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) non of the above

(ii)

(iii)

Place: Singuru

Date: 14/05/2023

P. Prasanna Rani
Signature of the Student



Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Vani

Group : C.B.Z (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	1-84	Habitat /Ward	1st	Panchayat /Municipality	Accipolavalasa
Post office	Kinthai	Mandal	Ponduru	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. Narsingarao	Male	45	10th	farmer	40,000
2.	P. Namasamma	Female	40	-	house wife	
3.	P. Manika	Female	18	degree	Educated	
4.	P. Suvarna	Female	17	inter	Educated	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kainga (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: 500 Acres

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

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

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

(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: 8790955875

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

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

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

(i) water Problems

(ii) Roads Problem

(iii)

Place: singuru

Date: 14/05/2023

P. Prasanna rani
Signature of the Student



Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Yani

Group : C.B.E (F) (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	2-02	Habitat /Ward	Singurul/3	Panchayat /Municipality	Accipalavalasa
Post office	Kirthai	Mandal	Produr	District	Srikulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	S. Ammadu	MALE	58	8th	FORMER	{ 35,000 }
2.	S. Ramanamma	FEMALE	35	-	FORMER	
3.						

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 200 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: 9676863562

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

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

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

(i) water Problem

(ii)

(iii)

Place: Singuru

Date: 14/05/2023

P. Prasanna Bij
Signature of the Student



Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Rani

Group : C.B.7 (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	1-88	Habitat /Ward	Singuru	Panchayat /Municipality	Arripalayalasa
Post office	Kinthari	Mandal	Ponduru	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	S. Ramayao	male	46	inter	Former	{ 60,000 }
2.	S. Srikala	female	40	5th	house wife	
3.	S. Umamahesh	male	23	-	soft wear	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kainga (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: 600 Acres

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

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

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

(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: 8106042329

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

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

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

(i) Road Problems

(ii)

(iii)

Place: Singuru

Date: 15/05/2023

P. Prasanna rani

Signature of the Student



Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. prasanna rani

Group : C.B.Z (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	1-50	Habitat /Ward	singuru 1	Panchayat /Municipality	accipalavaiasa
Post office	kinthari	Mandal	Ponduru	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. krishmarao	male	45	-	Former	{ 75,000 }
2.	D. Jayalakshmi	Female	40	-	Former	
3.	D. Venkata rao	male	16	Politechnic	Educated	
4.	D. lahari	Female	15	10-th	Educated	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: kainga (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 2 Oxen _____ Buffaloes _____ Sheep/Goats 2 .

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

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

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

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

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 8008353812

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

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

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

(i) water Problem

(ii)

(iii)

Place: Singuru

Date: 15/05/2023

P. Prasanna Bai
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna rani

Group : C.B.E (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	1-85	Habitat /Ward	Singuru 1	Panchayat /Municipality	Accipalavaiasa
Post office	Kiothai	Mandal	Doduru	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. Parinaidu	Male	80	7th	Farmer	{ 90,000 }
2.	P. Narayanamma	Female	71	-	Farmer	
3.	P. Ravikumari	male	50		Army	
4.	P. Rasya lakshmi	Female	43	degree	house wife	

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1.50 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: 8790630723

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

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

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

(i) Road Problems

(ii)

(iii)

Place: Singuru

Date: 15/05/2023

P. Prasanna Bij
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna rani

Group : C.B.Z (B.Sc)

Registration Number : 22001049059

Area of the Survey conducted:

House No.	1-83	Habitat /Ward	Singuru	Panchayat /Municipality	Arripalayalasa
Post office	Kinthai	Mandal	Ponduru	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. Bagamani	Female	60	-	Farmer	{ 90,000 }
2.	D. Kantha rao	male	37	10th	Army	
3.	D. Prakashyani	Female	25	degree	house wife	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kalinga (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: 8309333825

(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) Dusted cooler

(ii)

(iii)

Place: Singuru

Date: 15/05/2023

P. Prasanna
Signature of the Student

hm

Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Rani

Group : C.B.E [F] (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	2-72	Habitat /Ward	Singuru 1	Panchayat /Municipality	Accipalavolasa
Post office	Kothai	Mandal	Ponduru	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	S. Krishnaamurthi		43		Former	{ 60,000 }
2.	S. Prabhavathi		35		house wife	
3.	S. Deepika		15		Educated	
4.	S. Keerthana		13		Educated	

2. Social Status details:

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

(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: 9182277319

(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) Drinage Problems

(ii)

(iii)

Place: singuru.

Date: 16/05/2023

P. Prasanna Raj
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : p. prasanna Rani

Group : G.B.Z (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	1-33	Habitat /Ward	Singuru 1	Panchayat /Municipality	Accipolavala
Post office	Kinthali	Mandal	Ponduru	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. Jagannathan Rao	Male	50	10th	Farmer	} 90,000 }
2.	D. Laxmi	Female	40	7th	house wife	
3.	D. Vivek vardhan	Male	21	B.Tech	Educated	
4.	D. Priyanka	Female	20	Degree	Educated	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kalinga (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: 7036222162

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

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

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

(i) water Problem


(ii)

(iii)

Place: Singuru

Date: 10/05/2023

P. Prasanna Bij
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Rani

Group : C.B.E (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	1-73 1-73	Habitat /Ward	singuru 1	Panchayat /Municipality	Arripolaivalasa
Post office	kiythai	Mandal	Ponduru	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. Prasadran		47	10th	FORMER	{ 50,000 }
2.	B. Saraswathi		40	2nd	house wife	
3.	B. BALU		17	11T	Educated	

2. Social Status details:

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

(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: 8186045367

(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) Drinage Problem

(ii) Road Problem

(iii) Dusting water

Place: Singuru

Date: 16/05/2023

P. Prasanna
Signature of the Student



Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna Rani

Group : C.B.E (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	2-43	Habitat /Ward	1	Panchayat /Municipality	Accipalasa
Post office	Kinthari	Mandal	Ponduru	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. Krishnarao	Male	40	inter	Farmer	{ 90,000 }
2.	D. Jayalakshmi	Female	27	inter gu	Farmer	
3.	D. Nishanth	male	11	6th	-	
4.	D. Ravikiran	male	10	5th	-	
5.	D. Anandran	male	100	6th	farmer	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Kalinga (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: 900 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 L.P.G

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

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

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

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

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

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

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9959883467

(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) Drinage Problem

(ii)

(iii)

Place: Singuru

Date: 16/05/2023

P. Prasanna Yani
Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Prasanna rani

Group : C.B.E (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	1-87	Habitat /Ward	Singuru/1	Panchayat /Municipality	Accipalavalasa
Post office	Kinthai	Mandal	Ponduru	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	S. Rammohan rao	male	44	ITI	Farmer	₹ 30,000
2.	S. Lakshmi	Female	40	10th	Farmer	
3.	S. Jhansi	Female	17	polytechnic	educated	
4.	S. Bodumathi	Female	15	inter	educated	

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1 Acres

(vi) Livestock resources: Cows 1 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: 9703223769

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

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

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

(i) water Problem.

(ii)

(iii)

Place: Singuru.

Date: 12/05/2023

P. Prasanna
Signature of the Student

[Signature]
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : Paidi . Prasanna rao

Group : C.B.Z (B.Sc)

Registration Number : 2222001049059

Area of the Survey conducted:

House No.	2-00	Habitat /Ward	Singuru/2	Panchayat /Municipality	Arripalavolase
Post office	kinthari	Mandal	Panduru	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	S. Ramaram	Male	60	-	Former	{ 80,000 }
2.	S. Bhavathi	Female	50	-	Former	
3.	S. Ramu	male	34	Degree	software	
4.	S. Dilescavul Rao	male	27		C.R.P.F	

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1.80 Acres

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

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

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

(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: 6309876306

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

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

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

(i) Drainage Problem.

(ii)

(iii)

Place: singuru

Date: 12/05/2023

P. Prasanna rani
Signature of the Student



Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY CONSOLIDATION REPORT

Name of the student : p. prasanna Rani

Group : B.Sc (C.B.E)

Name of the Mentor : Gr. Ramakrishna sir

Name of the Project :

Ward/ Habitat	2	Panchayat	Accipolavaiasa	Post Office	Kinthali
Mandal	Ponduru	District	Sriakulam	Pin Code	532402

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

2. Number of Houses Caste-wise:

SC _____ ST _____ OC _____ BC-A 28 BC-B _____ BC-C _____ BC-D _____

3. Common Health problems in the Habitat/Ward:

- (i) sugar
- (ii) cough
- (iii)

4. Number of White Ration Cards: 25

5. Number of Illiterates in the Ward/ Habitat/ Village: 14

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

7. Number of Job Holders: 2

8. Number of PWD People: .

9. Number of DWACRA Groups in the Ward/ Habitat/ Village: 28

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

11. Bus facility available: Yes / No

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

- (i) Drinage
- (ii) Drinking water
- (iii) Road facility
- (iv)

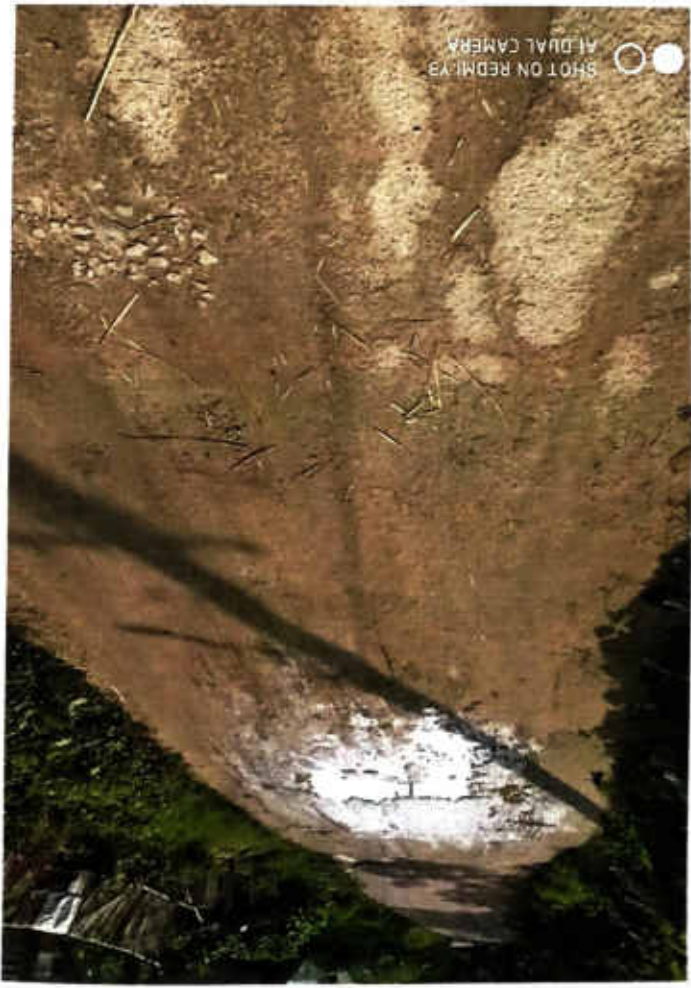
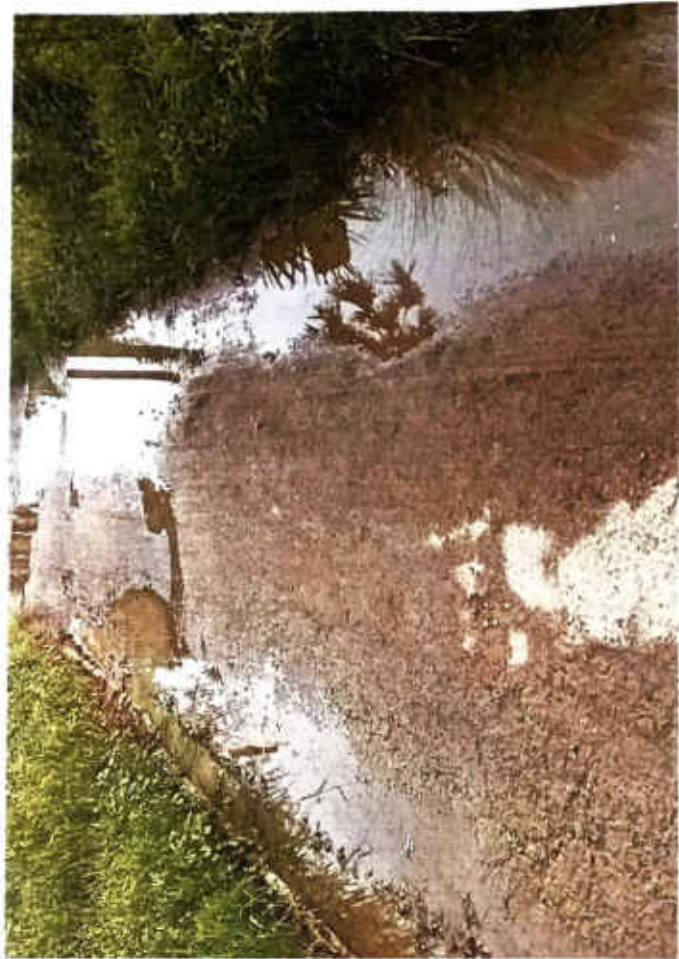
Signature of the Mentor

P. Prasanna Rani
Signature of the Student

Socio - economic survey









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



Name of the student : P. Prasanna Rani
Group : (B.Sc) C.B.Z
Name of the mentor : G. Rama Krishna
Name of the project : food habits.

House No	Name of the person	Village / Ward	Mandal	District
2-186.	K. Naidu	Singuru	Ponduru	Srikakulam

1. How many times a day do you eat?

3 times

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

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

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?

57 kg

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

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. Prasanna 
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : (B.Sc) C.BZ
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-166	S. Ramesh	singuru	Ponduru	srikakulam

1. How many times a day do you eat?

3 times

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

- a. I eat a good breakfast *yes*
- b. I experienced feeling of hunger during the day *yes*
- c. I eat meat. *yes*
- d. I eat vegetables. *yes*
- e. I eat fruits. *yes*
- f. I eat dairy products *yes*
- g. I eat sweets. *NO*

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?

53 kg

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 , chicken , Junkfood

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna 
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Ranj
Group : C.B.Z (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-167	D. Nagamani	Singuru	Paduru	Srikakulam

1. How many times a day do you eat?

2 times

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

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

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?

64 kg

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 , meat , Junkfoods .

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. Prasanna 
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasantha Rani
Group : C.B.E (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-168	G. Gaddamma	Singuru	Ponduru	Srikakulam

1. How many times a day do you eat?

3 times

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

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

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

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

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

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

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

6. Do you have any particular food allergies?

NO

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

Sweet foods:

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

Fresh vegetables & Fruits:

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

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

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

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

NO

11. Do you know your current body mass index?

40 kg

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?

meat , vegetables , PULSES , Junkfoods

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna 
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.2 (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-169	T. Ammana.	singuru	ponduru	Srikakulam

1. How many times a day do you eat?

3 times

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

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

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?

55 kg

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, meat, Junkfood

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

Restful sleep

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

Health


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

Weight.

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

Mental condition.

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

P. Prasanna 
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.Z (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-170	S. Laxmi	Singuru	Ponduru	Srikakulam

1. How many times a day do you eat?

3 times

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

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

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?
61 kg

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna 
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.E (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-171	P. Yandamma.	singuru	panduru	Sri kakulam

1. How many times a day do you eat?

2 times

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

- a. I eat a good breakfast *yes*
- b. I experienced feeling of hunger during the day *yes*
- c. I eat meat. *yes*
- d. I eat vegetables. *yes*
- e. I eat fruits. *yes*
- f. I eat dairy products *yes*
- g. I eat sweets. *no*

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

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

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

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

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

6. Do you have any particular food allergies?

no

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

Sweet foods:

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

Fresh vegetables & Fruits:

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

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

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

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

NO

11. Do you know your current body mass index?

65 kg

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, fruits, meat, pulses, cereals,

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. Prasanna 
Signature of the Student



Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.T (B.Sc)
Name of the mentor : G. Ramakrishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-178	P. Suvaramma	Singur	Ponduru	Srikakulam

1. How many times a day do you eat?

2 times

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

- a. I eat a good breakfast *yes*
- b. I experienced feeling of hunger during the day *yes*
- c. I eat meat. *No*
- d. I eat vegetables. *yes*
- e. I eat fruits. *yes*
- f. I eat dairy products *yes*
- g. I eat sweets. *no*

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?

yes

11. Do you know your current body mass index?

90 kg

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, pulses, meat, junk food.

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna 
Signature of the Student



Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.Z (B.Sc)
Name of the mentor : G. Ramakrishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-112	S. Nandamma	Singuru	Ponduru	Srikakulam

- How many times a day do you eat?
- Please answer the following according to your particular eating habits?
 - I eat a good breakfast *yes*
 - I experienced feeling of hunger during the day *yes*
 - I eat meat. *yes*
 - I eat vegetables. *yes*
 - I eat fruits. *yes*
 - I eat dairy products *yes*
 - I eat sweets. *yes*
- 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?

59 kg

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, meat, Junk food

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

Restful sleep

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

Health


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


Weight.

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

Mental condition.

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

P. Prasanna 
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.T (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits.

House No	Name of the person	Village / Ward	Mandal	District
2-180	P. Arudhramma	Singuru	Ponduru	Srikakulam

1. How many times a day do you eat?

2 times

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

- a. I eat a good breakfast yes
b. I experienced feeling of hunger during the day yes
c. I eat meat. yes
d. I eat vegetables. yes
e. I eat fruits. yes
f. I eat dairy products yes
g. I eat sweets. No

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?

Yes

11. Do you know your current body mass index?

80 kg

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, fruits, junkfoods.

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. Prasanna Buj
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.Z (B.SC)
Name of the mentor : G. Rama Krishna
Name of the project : food habits.

House No	Name of the person	Village / Ward	Mandal	District
2-181	D. Venkatarao	Singuru	Panduru	Srikakulam

1. How many times a day do you eat?

2 times

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

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

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?

53 kg

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 , meat , cereals , Junkfood

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna Bui
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.E (B.Sc)
Name of the mentor : Sr. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-17A	S.V. Ardayya	Singuru	Teekurru	SRIKAKULAM

- How many times a day do you eat?
2 times
- Please answer the following according to your particular eating habits?
 - I eat a good breakfast YES
 - I experienced feeling of hunger during the day YES
 - I eat meat. YES
 - I eat vegetables. YES
 - I eat fruits. YES
 - I eat dairy products YES
 - I eat sweets. NO
- What meal would you consider to be your main meal of the day?
 - Breakfast 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?
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?

60 kg

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?

NO vegetables, fruits, meat, junkfood.

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanra Bui
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.E (B.Sc)
Name of the mentor : Gt. Rama Krishna
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
2-185		Singuru	Ponduru	Srikakulam

1. How many times a day do you eat?

3 times

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

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

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?

40 kg

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

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. Prasanna 
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.Z (B.Sc)
Name of the mentor : Gr. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-184		singuru	Panduru	Srikakulam

1. How many times a day do you eat?

2 times

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

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

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?

56 kg

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

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. Prasanna Buj
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Yani
Group : C.B.Z (B.Sc)
Name of the mentor : Sr. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-183	P. Sumathi	singuru	Ponduru	Srikakulam

1. How many times a day do you eat?

3 times

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

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

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

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

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

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

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

6. Do you have any particular food allergies?

* Rashes.

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?
59 kg

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?

vegetable, meat, junkfood.

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna 
Signature of the Student



Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.E (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-182	D. Ganapathi	Singuru	Panduru	Srikakulam.

1. How many times a day do you eat?

3 times

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

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

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?
60 kg

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, meat, junk food

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna 
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna rani
Group : C.B.Z (B.sc)
Name of the mentor : G. Rama Krishna
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
2-02	S. Ammadu	singuru	Panduru	Srikakulam

1. How many times a day do you eat?

2 times

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

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

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

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

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

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

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

6. Do you have any particular food allergies?

NO

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

Sweet foods:

Several times a day once a day several times a week

less often never

Fresh vegetables & Fruits:

Several times a day once a day several times a week

less often never

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

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

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

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

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

NO

11. Do you know your current body mass index?

55 kg

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?

meat, vegetable, 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. Prasanna 
Signature of the Student

Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.Z (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : FOOD HABITS

House No	Name of the person	Village / Ward	Mandal	District
1-84	P. P. P. Narsinga Rao	Singuru	Ponduru	Srikakulam

1. How many times a day do you eat?

3 times

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

- I eat a good breakfast Yes
- I experienced feeling of hunger during the day Yes
- I eat meat. Yes
- I eat vegetables. Yes
- I eat fruits. Yes
- I eat dairy products Yes
- I eat sweets. NO

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?
56 kg

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?

meat, vegetable, fruits, Junk food.

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna Rani
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.E (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : FOOD habits

House No	Name of the person	Village / Ward	Mandal	District
2.01	S. Ramajiao	Singuru	Ponduru	Srikakulam

1. How many times a day do you eat?

2 times

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

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

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

- 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?

(1) Rashes

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?

59 kg

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, meat, fruits, Junkfood

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

Restful sleep

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

Health

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


Weight.

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

Mental condition.

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

P. Prasanna Bij
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna rani
Group : C.B.E (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
1-85	P. Ravikumar	singuru	Ponduru	srikakulam

1. How many times a day do you eat?

3 times

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

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

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

- a. Breakfast 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?

60 kg

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?

meat , fruits , Junk food , pulses .

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. Prasanna 
Signature of the Student



Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.Z (B.sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
1-83	D. Kanthayao	Singuru	Panduru	Srikakulam

1. How many times a day do you eat?

2 times

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

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

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

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

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

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

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

6. Do you have any particular food allergies?

NO

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

Sweet foods:

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

Fresh vegetables & Fruits:

- Several times a day once a day several times
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?

60 kg

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?

Pulses, Vegitable, fruits, Junkfood

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna Bij
Signature of the Student



Signature of the Mentor



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



Name of the student : P. Prasanna Vari
Group : C.B.T (B.Sc)
Name of the mentor : M. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-72	S. Prabhavathi	singuru	Panduru	Srikakulam

1. How many times a day do you eat?

3 times

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

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

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?

53 kg

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?

vegetable, fruits, meat, Junkfood

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna By
Signature of the Student



Signature of the Mentor



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



Name of the student : P. Prasanna Rao
Group : C.B.Z (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits.

House No	Name of the person	Village / Ward	Mandal	District
1-33	D. lakshmi	singun	Ponduru	srikakulam

- How many times a day do you eat?
3 times
- Please answer the following according to your particular eating habits?
 - I eat a good breakfast Yes
 - I experienced feeling of hunger during the day Yes
 - I eat meat. Yes
 - I eat vegetables. Yes
 - I eat fruits. Yes
 - I eat dairy products Yes
 - I eat sweets. Yes
- 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?

55 kg

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, Junk food, meat

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. Prasanna Bij
Signature of the Student



Signature of the Mentor



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



Name of the student : P. Prasanna Rani
Group : C.B.Z (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
1-73	P. Prasad Rao	Singuru	Ponduru	Srikakulam

- How many times a day do you eat?
3 times
- Please answer the following according to your particular eating habits?
 - I eat a good breakfast yes
 - I experienced feeling of hunger during the day yes
 - I eat meat. yes
 - I eat vegetables. yes
 - I eat fruits. yes
 - I eat dairy products yes
 - I eat sweets. yes
- What meal would you consider to be your main meal of the day?
 - Breakfast 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?
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?

75 kg

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

Yes

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

vegetables, fruits, pulses, cereals

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. Prasanna 
Signature of the Student

Signature of the Mentor



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



Name of the student : P. Prasama Vani
Group : C.B.Z (B.Sc)
Name of the mentor : Gt. Rama Krishna
Name of the project : food habits

House No	Name of the person	Village / Ward	Mandal	District
2-43	D. Krishnarao	Singuru	Ponduru	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 *yes*
- b. I experienced feeling of hunger during the day *yes*
- c. I eat meat. *yes*
- d. I eat vegetables. *yes*
- e. I eat fruits. *yes*
- f. I eat dairy products *yes*
- g. I eat sweets. *no*

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

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

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

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

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

6. Do you have any particular food allergies?

NO

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

Sweet foods:

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

Fresh vegetables & Fruits:

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

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

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

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

NO

11. Do you know your current body mass index?

80 kg

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, cereals, meat, Junkfood

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna Yani
Signature of the Student



Signature of the Mentor



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



Name of the student : P. Prasanna rani
Group : C.B.Z (B.sc)
Name of the mentor : Sr. Rama Krishna
Name of the project : food habits.

House No	Name of the person	Village / Ward	Mandal	District
1-87	S. Lakshmi	singuru	ponduru	Srikakulam

1. How many times a day do you eat?

3 times

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

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

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?

60 kg

11. Do you know your current body mass index?

NO

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

NO

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

vegetables, fruits, meat, Junk food

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Prasanna rani

Signature of the Student



Signature of the Mentor



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



Name of the student : P. Prasanna Vani
 Group : C.B.T (B.Sc)
 Name of the mentor : G. Rama Krishna sir
 Name of the project : Food habits.

House No	Name of the person	Village / Ward	Mandal	District
1-88	S. Srikanth	singam	Panduram	SRIKAKULAM

- How many times a day do you eat?
2 times
- Please answer the following according to your particular eating habits?
 - I eat a good breakfast *yes*
 - I experienced feeling of hunger during the day *yes*
 - I eat meat. *yes*
 - I eat vegetables. *yes*
 - I eat fruits. *yes*
 - I eat dairy products *yes*
 - I eat sweets. *yes*
- What meal would you consider to be your main meal of the day?
 - Breakfast
 - 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?

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?

65 kg

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 , meat , junkfood

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

Restful sleep

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

Health

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


Weight.

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

Mental condition.

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

P. Prasanna Raj
Signature of the Student


Signature of the Mentor



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



Name of the student : P. Prasanna Vani
Group : C.B.Z (B.Sc)
Name of the mentor : G. Rama Krishna
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-7a	A. Andamma	singuru	Panduru	Srikakulam

1. How many times a day do you eat?

2 times

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

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

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

- a. Breakfast b. lunch *e. 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?

1) sugar

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?
70 kg

12. Have your ever been on a diet, if so, what kind?
~~NO~~ yes

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

vegetables, fruits, meat

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

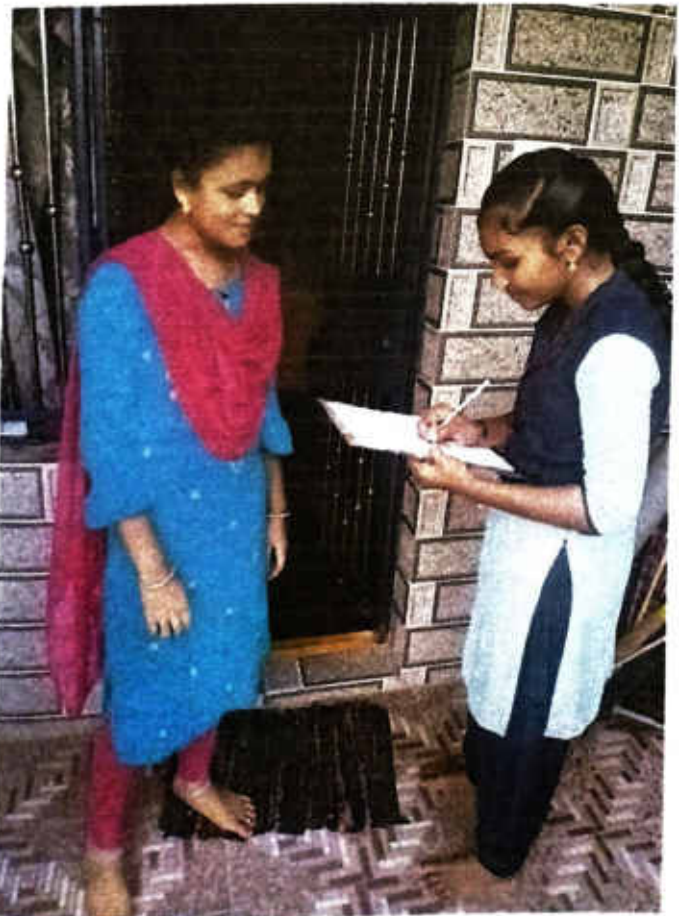
P. Prasanna Pij
Signature of the Student


Signature of the Mentor



Food Habits





CONCLUSION

I'm P.Prasannarani studying in B.SC first year Cbz group.I had completed the community service project on "FOOD HABITS" in our Village and submitted the report to my mentor.My project is about the food habits of our Village people,I conducted questionnaire to different age groups people about their regular diet.Most of the old aged people considered lunch as their main meal of the day. They taking food only two times per day due to digestive problems. We find out the major problem facing by our villagers and dropped the Sarpanch attention towards the problem by conducting awareness program in our Village.

It was interesting to carry out this project to know about different opinions, food habits and problems of our villagers. Finally I believe that my project is complete under vision of my mentor. I thank him for his guidance and support.

By

PAIDI.PRASANNARANI