A PROJECT
ON
COMMUNITY SERVICE

Submitted in the partial fulfillment of the requirements for the award of

Bs.c degree

BY

PODILAPU.BHARGAVI

222200104906 8

Semester 2 (BZC)

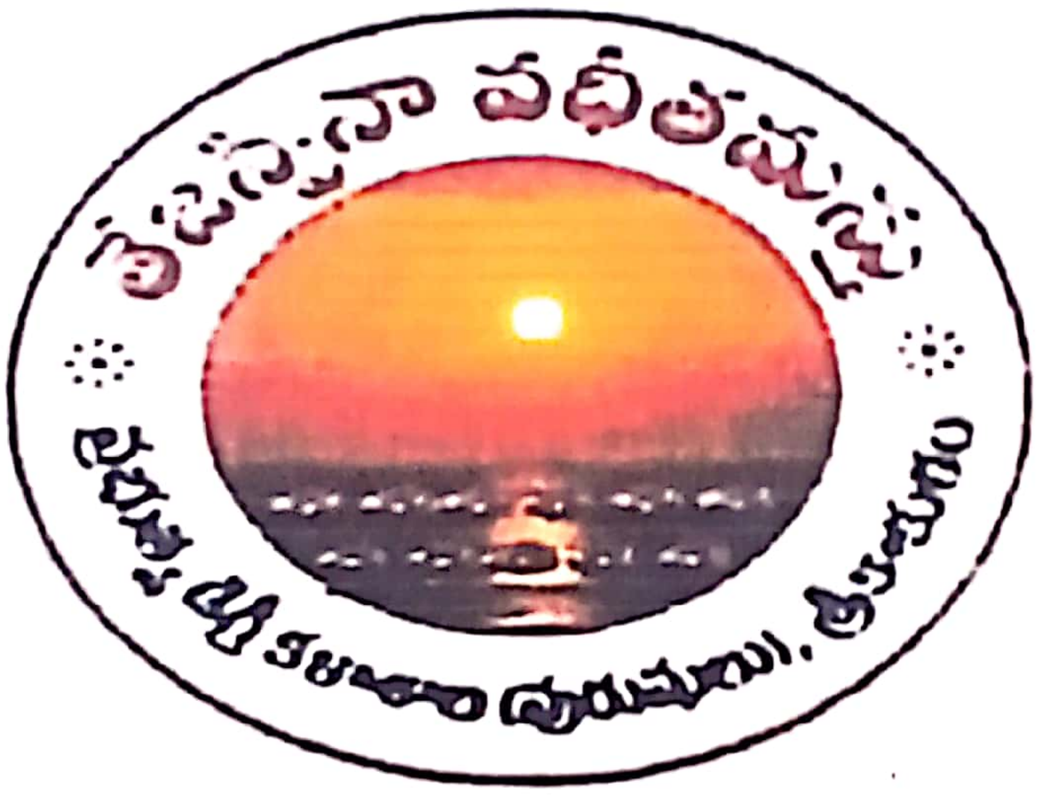
Batch 2022-2025

Under the supervision of

D.Ravindra

Letchrer in Botany

GOVERNMENT DEGREE COLLEGE(Men), SRIKAKULAM



WEBSITE: WWW.gcmsklm.ac.in

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ACKNOWLEDGEMENT

I would like to express my gratitude to all those who gave me the possibility to complete thi Community Service Project. Special thanks to Mentor D.Ravindra 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.

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DECLARATION

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

Srikakulam
Date:.

P. Bhargavi
Signature of the candidate
Name: PODILAPU. BHARGAVI

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CERTIFICATE

I certified that Podilapu.Bhargavi studying Bsc Cbz group has completed and submitted the project report on "FOOD HABITS"further partial fulfillment of the requirements for the award of Batchelor of science under my supervision during the academic year 2022-2023.

Date:
Place:

D. Ravi

Project guide
D.Ravindra
Letchrer in Botany
GDC(M), srikakulam

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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 idio syncracies 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.

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OBJECTIVE

The aim and objective of this project is to find out in o 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 mea/ 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.

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GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906S

Name of the Mentor : D. Ravindra

Name of the Project : Socio Economic survey on food Habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
09-05-23 Tuesday	Socio Economic Survey	6hours	P. Bhargavi
10-05-23 wednesday	Socio Economic Survey	7hours	P. Bhargavi
11-05-23 Thursday	Socio Economic Survey	7:30hours	P. Bhargavi
12-05-23 Friday	Socio Economic Survey	5:30hours	P. Bhargavi
13-05-23 saturday	Socio Economic Survey	6 hours	P. Bhargavi
14-05-23 Sunday	Socio Economic Survey	4hours	P. Bhargavi
15-05-23 monday	Socio Economic Survey	6:30hours	P. Bhargavi
16-05-23 Tuesday	Socio Economic Survey	6hours	P. Bhargavi

D. Ravi

Signature of the Mentor

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GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906S

Name of the Mentor : D. Ravindra.

Name of the Project : Food habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
20-05-23 saturday	Food Habits	7hours	P. Bhargavi
21-05-23 Sunday	Food Habits	5hours	P. Bhargavi
22-05-23 monday	Food Habits	6:30hours	P. Bhargavi
23-05-23 Tuesday	Food Habits	4:30hours	P. Bhargavi
24-05-23 wednesday	Food Habits	7hours	P. Bhargavi
25-05-23 Thursday	Food Habits	5:30 hours	P. Bhargavi
26-05-23 Friday	Food Habits	6hours	P. Bhargavi
27-05-23 Saturday	Food Habits	5:30 hours	P. Bhargavi
28-05-23 Sunday	Food Habits.	7:00 hours	P. Bhargavi

D. Ravi

Signature of the Mentor

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GOVT. DEGREE COLLEGE(M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Bhargavi

Group : CBZ

Registration Number : 222200101-90068

Name of the Mentor : D. Ravindra

Name of the Project : Awareness programme on food Habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
17-05-23 wednesday	Awareness programme	6Hours	P. Bhargavi
18-05-23 Thursday	Awareness programme.	5Hours	P. Bhargavi
19-05-23 Friday	Awareness programme.	7Hours	P. Bhargavi

D. Ravi

Signature of the Mentor

06-06-23 Tuesday	Project work
07-06-23 Wednesday	Project work
08-06-23 Thursday	Project work
09-06-23 Friday	Project work
10-06-23 Saturday	Project work
12-06-23 Monday	Project work
13-06-23 Tuesday	Project work
14-06-23 Wednesday	Project work
15-06-23 Thursday	Project work
16-06-23 Friday	Project work
17-06-23 Saturday	Project work
19-06-23 Monday	Project work
20-06-23 Tuesday	Project work
21-06-23 Wednesday	Project work
22-06-23 Thursday	Project work
23-06-23 Friday	Project work
24-06-23 Saturday	Project work
26-06-23 Monday	Project work
27-06-23 Tuesday	Project work
28-06-23 Wednesday	Project work
29-06-23 Thursday	Project work
30-06-23 Friday	Project work
01-07-23 Saturday	Project work
03-07-23 Monday	Project work
04-07-23 Tuesday	Project work
05-07-23 Wednesday	Project work
06-07-23 Thursday	Project work
07-07-23 Friday	Project work

Project Completion Certificate

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY CONSOLIDATION REPORT

Name of the student : P. Bhargavi

Group : CBZ

Name of the Mentor : D. Ravi Babu

Name of the Project : community survey project

Ward/ Habitat	chinnaveedi	Panchayat	Perikivarsbi	Post Office	Perum
Mandal	L.N. Peta	District	Srikakulam	Pin Code	532456

1. Total Number of Houses in the Habitat/Ward: 50
2. Number of Houses Caste-wise:

SC ____ ST ____ OC ____ BC-A ____ BC-B ____ BC-C ____ BC-D 50

3. Common Health problems in the Habitat/Ward:

(i) Fever, cold

(ii) Head ache.

(iii) Cough.

4. Number of White Ration Cards: 50

5. Number of Illiterates in the Ward/ Habitat/ Village: 25

6. Number of Graduates in the Ward/ Habitat/ Village: 25

7. Number of Job Holders: 10

8. Number of PWD People: NO

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

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

11. Bus facility available: Yes / No ✓

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

(i) water problem

(ii) Stagnated water

(iii)

(iv)

D. Ravi

Signature of the Mentor

P. Bhargavi

Signature of the Student

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906 8

Area of the Survey conducted:

House No.	1-59	Habitat /Ward	Chinna Veedi	Panchayat /Municipality	Ravichandri
Post office	PUSAM	Mandal	L.N. Peta	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Runku. Dhanalaxmi	female	27	Degree	Volunteer	5000/-
2.	Runku. Janardhan	male	32	Degree	Volunteer	7000/-

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

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

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(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: 9515917622

(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 facility

(ii)

(iii)

Place: Ravichandri

Date: 04-05-2023

P. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104490068

Area of the Survey conducted: Ravichandri

House No.	1-60	Habitat /Ward	Chinna Vedi	Panchayat /Municipality	Ravichandri
Post office	Pusam	Mandal	L.N. Peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Sahitapu. Punyavathi	female	35	8th class	Labour	7000/-
2.	Sahitapu. Sathu	male	40	9th class	Labour	9000/-
3.	Sahitapu. Simhadri	male	18	degree	NO	NO

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: NO Acres

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

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(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 NO

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: 8985401562

(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 scarcity

(ii)

(iii)

Place: Ravichandbi

Date: 09-05-2023

P. Bhajjavi
Signature of the Student

D. Rao
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222001049068

Area of the Survey conducted: Ravichandaji

House No.	1-61	Habitat /Ward	Chinna Veedi	Panchayat /Municipality	Ravichandaji
Post office	Pusam	Mandal	L.N.peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Chittivalasa. Lakmi	F	50	ND	Labour	5000/-
2.	Chittivalasa. appaji	male	53	ND	Labour	6000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 1.3 Acres

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

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(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 NO

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: 9490344328

(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) Drinking water scarcity

(ii)

(iii)

Place: Ravidpanduri

Date: 09-05-2023

P-Bhargavi
Signature of the Student

D-Rao
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222001049068

Area of the Survey conducted: Ravichandra

House No.	1-62	Habitat /Ward	chinaveedi	Panchayat /Municipality	Ravichandra
Post office	PUSAM	Mandal	L.N.peta.	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	chittivalasa. Ramu gotri	F	45	NO	Daily cooli	7000/-
2.	chittivalasa Ramu	male	50	NO	Daily labour	9000/-
3.	chittivalasa. Ramu	male	10	5th class	NO	NO
4.	chittivalasa. Sriru	male	07	2nd class	NO	NO

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: No Acres

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

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(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: 8074109027

(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 scarcity

(ii)

(iii)

Place: Ravichandai

Date: 10-05-2023

P. Bhargavi
Signature of the Student

D. Rally
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : B.Sc

Registration Number : 2222004908 68

Area of the Survey conducted: Ravichandri

House No.	1-63	Habitat /Ward	Chinnaveedhi	Panchayat /Municipality	Ravichandri
Post office	Pusam	Mandal	L.N.Peta.	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Chittivalasa. adiamma -a.	F	65	No	labour	3000/-

2. **Social Status details:**

(i) Community: SC/ST/ BC-A-B-C-D/ OC (II) Sub-Caste: KAPU (III) Religion: Hindu

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

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

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(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: 9490344350

(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 scarcity

(ii)

(iii)

Place: Ravichandai

Date: 10-05-2023

P. Bhavgavi
Signature of the Student

D-Ravi
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222208104040062

Area of the Survey conducted: Ravibaradi

House No.	1-64	Habitat /Ward	Bhramaram	Panchayat /Municipality	Ravibaradi
Post office	Dusam	Mandal	Laveru	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Professional/ Employment	Monthly Salary/ wages/ Pension/ Allowance
1.	Punku. Sumachandra	F	66	5th	Daily wages	7000/-

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

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

(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: 8919490684

(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: Ravichandai

Date: 10-05-2023

P. Bhargavi
Signature of the Student

D-Ravi
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906 8

Area of the Survey conducted: Ravichandri

House No.	1-65	Habitat /Ward	Chinnaveedi	Panchayat /Municipality	Ravichandri
Post office	Pusam	Mandal	L.N. peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Kella. Savithri	F	62	ND	Daily coolie	5000/-
2.	Kella. Sonu	male	35	Inter	Employee	15000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

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

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(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: 9494348068

(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 scarcity

(ii)

(iii)

Place: Ravichandri

Date: 11-05-2023

P. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

Scanned with OKEN Scanner

GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906S

Area of the Survey conducted: Ravichandri

House No.	1-66	Habitat /Ward	chinnaveedi	Panchayat /Municipality	Ravichandri
Post office	Pusam	Mandal	L.N.peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	annavalli. sridevi	F	40	10Th	Tailor	7000/-
2.	annavalli. Thirupathi	male	45	NO	labour	6000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: NO Acres

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

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(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 N/A

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: 8464906645

(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: Ravichandabi

Date: 11-05-2023

P. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104Q068

Area of the Survey conducted: Ravichandri

House No.	1-67	Habitat /Ward	chinaveedi	Panchayat /Municipality	Ravichandri
Post office	Pusam	Mandal	L.N.peta	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1	Kdach. santhoshi	F	35	NO	NO/labour	5000/-
2.	Kdada. lakmi	Female	40	NO	labour	6000/-
3.	Kdada. Ravana	male	50	NO	labour	7000/-

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

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

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(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: 8919049064

(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: Ravichandri

Date: 11-05-2023

P. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

Scanned with OKEN Scanner

GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhavigavi

Group : CBZ

Registration Number : 222200104906B

Area of the Survey conducted: Ravichandai

House No.	1-68.	Habitat /Ward	Chinnaveedi	Panchayat /Municipality	Ravichandai
Post office	Pasam	Mandal	L.N.peta.	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Sanapu. mangamma	F	50	NO	labour	5000/-
2	Sanapu. shiva.	male	25	NO	NO	-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 3 Acres

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

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(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: 8074109027

(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: Ravichandri

Date: 12-05-2023

P. Bhargavi

Signature of the Student

D. Ravi

Signature of the Mentor

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25

GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906 8

Area of the Survey conducted: Ravichandri

House No.	1-69	Habitat /Ward	Chinraveedi	Panchayat /Municipality	Ravichandri
Post office	Pusam	Mandal	L.N.peta.	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Sirigapu. Surekha	F	40	ND	Cooker	4000/-
2.	Sirigapu. Buddu	male	45	ND	labour	5000/-
3.	Sirigapu. Bhavani	female	06	1st class	ND	-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 3 Acres

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

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(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 NO

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: 9494925018

(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: Ravichandrapi

Date: 12e-05-2023

P. Bhargavi
Signature of the Student

D. Ravi
Signature of the Mentor

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25

GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200749049068

Area of the Survey conducted: Ravichandra

House No.	1-70	Habitat /Ward	Chinna veedi	Panchayat /Municipality	Ravichandra
Post office	pusam	Mandal	L.N.peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Sarisapu. Ramalamma	F	50	NO	Labour	5000/-
2.	Sarisapu. Ramana	male	55	NO	Labour	7000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: NO Acres

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

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(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 NO

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: 8341805608

(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 pobblem

(ii)

(iii)

Place: Ravichandrai

Date: 12-05-2023

P. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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25

GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906B

Area of the Survey conducted: Ravichandabi

House No.	1-71	Habitat /Ward	Chinna Veedi	Panchayat /Municipality	Ravichandabi
Post office.	Pusam	Mandal	L.N. peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1	palli-Nagaramma	F	65	NO	labour	6000/-
2	palli-simhachalam	male	70	NO	labour	7000/-
3.	palli. ganesh	male	23	degree	NO	

2. **Social Status details:**

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

3. **'Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 3 Acres

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

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(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 NO

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: 9849198991

(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: Ravichandri

Date: 13-05-2023

P. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222201012068

Area of the Survey conducted: Ravichandri

House No.	1-72	Habitat /Ward	chinnaveedi	Panchayat /Municipality	Ravichandri
Post office	Pusam.	Mandal	L.N-peta.	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Sivala. Lakmi	F	50	ND	Agriculture	5000/-

2. Social Status details:

(I) Community: SC/ST/ BC-A-B-C-D/ OC (II) Sub-Caste: Kapu (III) Religion: Hindu

3. Economic Status details:

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

(II) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: ND Acres

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

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(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 NO

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: 9866318786

(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: Ravichandoji

Date: 13-05-2023

P. Bhargavi
Signature of the Student

D-Ravi
Signature of the Mentor

Name of t

Group

Registrat

Area of t

House No.
Post office

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhavani

Group : CBZ

Registration Number : 222200104906 8

Area of the Survey conducted: Ravichandri

House No.	1-73	Habitat /Ward	Chinna Veedi	Panchayat /Municipality	Ravichandri
Post office.	Posam	Mandal	L.N. peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Bezi. appalanarasa -mma	F	60	ND	labour	6000/-
2.	Bezi. appala swami	male	65	NO	labour	8000/-
3.	Bezi. ganesh.	male	40	Degree	army	50,000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own ✓/ Rented):

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

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

(v) Extent of Agricultural land: 6 Acres

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

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(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: 9177012787

(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 scarcity

(ii)

(iii)

Place: Ravichandai

Date: 13-05-2023

P. Bhargavi
Signature of the Student

D. Ravi
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : A Bhargavi

Group : CBZ

Registration Number : 222201049068

Area of the Survey conducted: Ravichandri

House No.	1-74	Habitat /Ward	chinaveedi	Panchayat /Municipality	Ravichandri
Post office	pusam	Mandal	L.N.peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Beri. Narayanamma	F	58	ND	daily coolie	5000/-
2.	Beri. Veerabhayya	male	60	ND	daily coolie	6000/-
3.	Beri. Vinod V	male	27	Degree	other	50,000/-

2. **Social Status details;**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 4 Acres

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

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(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 NO

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: 9948382006

(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 scarcity

(ii)

(iii)

Place: Ravichandrapuri

Date: 15-05-2023

P. Bhavyavi
Signature of the Student

D-Rao
Signature of the Mentor

Scanned with OKEN Scanner

GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906B

Area of the Survey conducted: Ravichandri

House No.	1-75	Habitat /Ward	Chinnaveedi	Panchayat /Municipality	Ravichandri
Post office	Pusam.	Mandal	L.N.peta.	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Beni. Ammbamma	F	70	ND	labour	5000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 4 Acres

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

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(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 NO

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: 9989481645

(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 scarcity

(ii)

(iii)

Place: Ravichandra

Date: 14-05-2023

P. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhagavi

Group : CBZ

Registration Number : 222208104908

Area of the Survey conducted: Porlchandi

House No.	1-76	Habitat /Ward	Chinapeedi	Panchayat /Municipality	Porlchandi
Post office	Porlchandi.	Mandal	L.N. Peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/ Weekly/ Monthly)
1.	Bedi. Simmma	M	60	No	labour	7000/-
2.	Bedi. Sarada	female	56	No	labour	5000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 4 Acres

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

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(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: 9177792983

(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 scarcity

(ii)

(iii)

Place: Ravichandoji

Date: 14-05-2023

P. Bhavgavi

Signature of the Student

D. Ravi

Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200149068

Area of the Survey conducted: Ravichandri

House No.	1-77	Habitat /Ward	chinna veedi	Panchayat /Municipality	Ravichandri
Post office	Pusam	Mandal	L.N.peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Aravalli. Latha.	F	35	NO	labour	500/-
2.	Aravalli. Viswanadh	male	37	NO	Carpenter	9000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: NO Acres

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

Mentor

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(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: 9652349755

(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: Ravichandri

Date: 15-05-2023

P. Bhavya

Signature of the Student

D. Ravi

Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906 8

Area of the Survey conducted: Ravichandrapi

House No.	1-78	Habitat /Ward	Chinna Veedi	Panchayat /Municipality	Ravichandrapi
Post office	Pusam	Mandal	L.N.peta.	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Galala. Tulasamma	F	45	No	Daily wakes	5000/-
2.	Galala. Gopi	male	21	Degree.	NO	No
3.	Galala. Bharthi	female	18	Degree.	NO	NO

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 5 Acres

(vi) Livestock resources: Cows 8 Oxen NO Buffaloes NO Sheep/Goats NO .

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(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: 9951069906

(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 facility

(ii)

(iii)

Place: Ravicharlu

Date: 15-05-2023

P. Bhargavi
Signature of the Student

D-Ravi
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222001049068

Area of the Survey conducted: Ravichandri

House No.	1-79	Habitat /Ward	Chinnaveedi	Panchayat /Municipality	Ravichandri
Post office	Pusam	Mandal	L.N.peta.	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Kamarapu. Reyyamma	F	65	NO	labour	5000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 3 Acres

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

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(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: 7702833677

(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) Coated problem

(ii)

(iii)

Place: Ravidhanabi

Date: 15-05-2023

P. Bhargavi
Signature of the Student

D-Rajy
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906 8.

Area of the Survey conducted: Ravichandari

House No.	1-80	Habitat /Ward	chinna veedi	Panchayat /Municipality	Ravichandari
Post office	Pusam	Mandal	L.N. peta.	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Kolla. Sanyasamma	F	55	NO	labour	6000/-
2.	Kolla. Ramulu	male	57	NO	Labour	7000/-
3.	Kolla. Naveen	male	28	B.Tech	Software	45,000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 5 Acres

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

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(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: 6303893375

(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: Ravichandri

Date: 16-05-2023

P. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104 9068

Area of the Survey conducted: Ravichandai

House No.	1-81	Habitat /Ward	Chinna Veedi	Panchayat /Municipality	Ravichandai
Post office	Pusam.	Mandal	L.N.pe-fa	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Bhaipu. samiram ma	F	65	No	Daily wiker	400/-

2. Social Status details:

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

3. Economic Status details:

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 5 Acres

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

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(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: 9705437101

(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: Ravichandbi

Date: 16-05-2023

P. Bhargavi
Signature of the Student

D Rao
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906 8

Area of the Survey conducted: Ravichandari

House No.	1-82	Habitat /Ward	chinna veedi	Panchayat /Municipality	Ravichandari.
Post office.	Pusam	Mandal	L.N.peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Sivipasapu. appala Naidu	F	50	NO	labour	5000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: 2 Acres

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

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(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: 9391181804

(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: Ravichandri

Date: 16-05-2023

P. Bhargavi
Signature of the Student

D. Raju
Signature of the Mentor

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GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhargavi

Group : CBZ

Registration Number : 222200104906 8

Area of the Survey conducted: Ravichandri

House No.	1-83	Habitat /Ward	chinna veedi	Panchayat /Municipality	Ravichandri
Post office	Pusam	Mandal	L.N. peta	District	Srikakulam

1. **Household Details:**

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
1.	Tankala. amaravathi	F	55	ND	Daily wages	5000/-

2. **Social Status details:**

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

3. **Economic Status details:**

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

(ii) House status (Own/ Rented):

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

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: NO Acres

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

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(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 NO

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: 7382541862

(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: Ravichandra

Date: 16-05-2023

P. Bhargavi
Signature of the Student

D. Ravi
Signature of the Mentor

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Socio- Economic survey









Socio- Economic Survey









Awareness programme.









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AWARENESS REPORT

Mosquito problem

Mosquito in my village (Ravichandr.LLN.Peta mandalam. srikakulam) cause some different sickness in many people(especially children's and old persons) will attacked by those mosquito and give them the virus that cause of dengue, malaria it is one of the main problems in my village .some families are worrying about these issues, they already been worrying because their children has encountering the different types of symptoms that they will attacked by the mosquito that affects their health.

The government already took action against these problems. They already throw some of the gases that can let those mosquitoes to came out and totally disappear.

Hence, I (Podilapu.Bhargavi) observed this mosquito problem and told my street people about mosquitoes controlling methods and make them aware as much as I could.

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

QUESTIONAIRE

Name of the student : P. Bhargavi

Group : CBZ

Name of the mentor : D. Rovindro

Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-59	Purru. Dharolammi	Pavichondoli	L.N. Peta	Srikakulam

1. How many times a day do you eat?

   3times

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 no
   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 ○

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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?

60kg

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?

Home made foods are Healthy to Diet
Not to take other foods

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

P. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-60	Sirisapapu. Punya Vathi	Ravichandari	L.N. Peta	Srikakulam

1. How many times a day do you eat?
   3 times a day
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 No
   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 ○

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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?

65KG

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?

Home made foods are Healthy

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. Bhargavi

Signature of the Student

D. Ravi

Signature of the Mentor

Scanned with OKEN Scanner

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-61	Chittivalasa. Lammi	Ravichandai	L.N. Peta	Srikakulam

1. How many times a day do you eat?
   3 times in a day
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 NO
   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 ○

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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

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

Home made foods are healthy

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. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

Scanned with OKEN Scanner

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

QUESTIONAIRE

Name of the student : P. Bhargavi

Group : CBZ

Name of the mentor : D. Ravindra

Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-62	Chittivalasa. Ramayan thi	Ravichandri	L.N. Peta	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 NO
   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 ○

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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?

60kg

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?

home made foods are Healthy to Diet

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. Bhargavi
Signature of the Student

D-Ravi
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi

Group : CBZ

Name of the mentor : D. Ravindra

Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-63	chittivalasa. adiamma	Ravichandri	L.N. peta	srikakulam

1. How many times a day do you eat?
   3times
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 NO
   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 ○

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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?

60kg

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? Home made food's are Healthy

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. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

Scanned with OKEN Scanner

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

QUESTIONAIRE

Name of the student : P. Bhargavi

Group : CBZ

Name of the mentor : D. Ravindra

Name of the project : Food. Habits

House No	Name of the person	Village / Ward	Mandal	District
1-63	Runku. Sujatamma	Ravichandri	L.N. Peta	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 NO
   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 ○

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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?

58kg

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?

Home made foods are healthy to eat

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. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

Scanned with OKEN Scanner

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

QUESTIONAIRE

Name of the student : P.Bhargavi

Group : CBZ

Name of the mentor : D.Ravindra

Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
1-64	Kella. Savithri	Ravichandri	L.N-Peta	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 No
   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 ○

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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?

55kg

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?

Home made foods are healthy

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. Bhargavi
Signature of the Student

D-Ravi
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-64	Arasavalli. Sridevi	Ravidhandai	L.N. peta	Srikakulam

1. How many times a day do you eat?
   3times
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 NO
   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 ○

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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?

65kg

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?

Home made foods are healthy to Diet

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. Bhargavi
Signature of the Student

D-Ravi
Signature of the Mentor

Scanned with OKEN Scanner

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

QUESTIONAIRE

Name of the student : P. Bhargavi

Group : CBZ

Name of the mentor : D. Ravindra

Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-65	Kada. santhoshi	Ravichandai	L.N. peta	Srikakulam

1. How many times a day do you eat?

   3times

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 NO
   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 ○

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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?

50kg

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?

Home made foods are healthy to Diet.

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. Bhargavi
Signature of the Student

D-Ravi
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Pavitra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-66	Bhargavi. Mangamma	Pavichondri	L.N. Peta	Srikakulam

1. How many times a day do you eat?
   3times.
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 No
   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 ○

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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?

55kg

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?

Home made foods are healthy

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

Restful sleep

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

Health

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

Weight.

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

Mental condition.

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

Signature of the Student

D. Roy

Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-67	Sajjiqupu. Sujatha	Ravichandri	L.N. peta	Srikakulam

1. How many times a day do you eat?
   3times
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 No
   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 ○

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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?

60kg

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? Home made foods are Healthy to Diet

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. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

Scanned with OKEN Scanner

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-68	Saisigapu. Ramulam ma	Ravichandai	L.N. peta	Srikakulam

1. How many times a day do you eat?
   3times
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 No
   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 ○

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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?

60kg

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?

Home made foods are healthy to eat

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. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi

Group : CBZ

Name of the mentor : D. Ravindra

Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-69	Palli. Nagamma	Ravichandra	L.N. Peta	Srikakulam

1. How many times a day do you eat?
   3times
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 NO
   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 ○

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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?

65kg

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?

Home made foods are healthy to eat

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. Bhargavi
Signature of the Student

D-Rao
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits.

House No	Name of the person	Village / Ward	Mandal	District
1-70	Sivvala. Laxmi	Ravichandri	L.N. peta	Srikakulam

1. How many times a day do you eat?
   3times
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 No
   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 ○

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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?

56kg

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?

Home made foods are healthy to eat.

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. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra.
Name of the project : Food habits.

House No	Name of the person	Village / Ward	Mandal	District
1-71	Bedi. appalanarasa mma.	Ravichandabi	L.N. peta	Srikakulam

1. How many times a day do you eat?
   3times
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 No
   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 ○

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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?

80kg

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?

Home made foods are Healthy to eat

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

Signature of the Student

D. Rally

Signature of the Mentor

Scanned with OKEN Scanner

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-72	Beri. Narayanamma	Ravichandri	L.N. peta.	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 NO
   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 ○

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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?

50kg

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?

Home made foods are Healthy to eat.

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. Bhargavi

Signature of the Student

D-Ravi

Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P.Bhargavi

Group : CBZ

Name of the mentor : D.Ravindra

Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-73	Beaf. Ajuddramma	Ravichandbi	L.N. Peta.	Srikakulam

1. How many times a day do you eat?
   3times

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 NO
   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?

Toko

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?

home made foods are healthy to eat.

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. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P.Bhargavi
Group : CBZ.
Name of the mentor : D.Ravindaa
Name of the project : Food habits.

House No	Name of the person	Village / Ward	Mandal	District
1-74	Beafi. Simmanna	Ravichandai	L.N.peta	Srikakulam

1. How many times a day do you eat?
   3times
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 No
   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 ○

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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?

50kg

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?

Home made food are Healthy to eat.

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. Bhargavi
Signature of the Student

D. Ravi
Signature of the Mentor

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

Name of the student : P. Bhargavi

Group : CBZ.

Name of the mentor : D. Ravindra

Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
1-75	Avaravalli. latha.	Ravichandai	L.N. Peta	Srikakulam

1. How many times a day do you eat?

   3time1

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 NO
   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 ○

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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?

45kg

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?

Home made foods are Healthy to eat.

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. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits.

House No	Name of the person	Village / Ward	Mandal	District
1-76	Gala. Tulasi	Ravichandri	L.N. peta	Srikakulam

1. How many times a day do you eat?
   3times
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 NO
   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 ○

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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?

57kg

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?

Home made foods are healthy to eat.

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. Bhargavi
Signature of the Student

D. Raju
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P.Bhargavi

Group : CBZ

Name of the mentor : D.Ravindra.

Name of the project : Food habits.

House No	Name of the person	Village / Ward	Mandal	District
1-77	Kamajapu. Reyyamma	Ravichandaji	L.N.Peta	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 NO
   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 ○

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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?

70kg

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?

Healthy to take home made food's

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. Bhargavi
Signature of the Student

D-Ravi
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi

Group : CBZ

Name of the mentor : D. Ravindra.

Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-78	Kolla. Sarasamma	Ravichandai	L.N. Peta	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 NO
   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 ○

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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?

66kgs.

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?

Home made foods are healthy to eat.

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. Bhargavi
Signature of the Student

D. Ravi
Signature of the Mentor

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(25)

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra.
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-79	Bhaipu. Sarojinamma	Ravichandai	L.N. Peta.	Srikakulam

1. How many times a day do you eat?
   3times
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 NO
   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 ○

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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?

75kg

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?

Home made foods are Healthy to eat.

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. Bhargavi
Signature of the Student

D. Rao
Signature of the Mentor

Scanned with OKEN Scanner

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

QUESTIONAIRE

Name of the student : P. Bhaagavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
1-80	Siripurapu. Appalanaidu	Ravichandai	L.N.peta	Srikakulam

1. How many times a day do you eat?
   3times
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 No
   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 ○

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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?

77kg

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?

Home made foods are healthy to Diet.

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. Bhargavi
Signature of the Student

D. Raju
Signature of the Mentor

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

QUESTIONAIRE

Name of the student : P. Bhargavi
Group : CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits.

House No	Name of the person	Village / Ward	Mandal	District
1-21	Tankala. Omkaravathi	Ravichandra?	L.N. peta	Srikakulam

1. How many times a day do you eat?
   3times in a day
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 NO
   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 ○

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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?

77kg

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?

Home made foods are healthy to eat.

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. Bhargavi
Signature of the Student

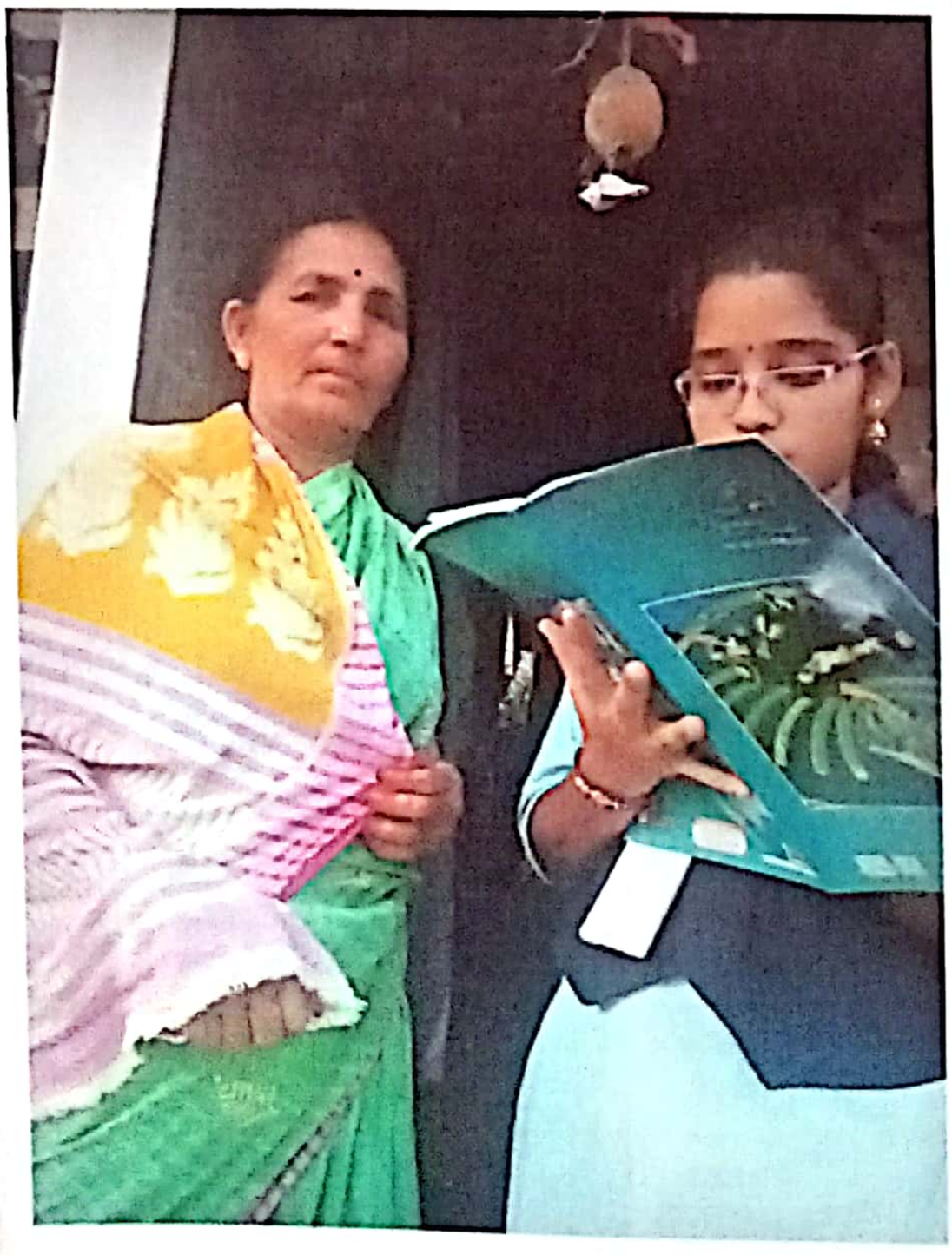
D. Rao
Signature of the Mentor

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Food Habits









Food Habits









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OBSERVATIONS:-

FOOD HABITS SURVEY

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

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

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CONCLUSION

I'm P.Bhargavi 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

PODILAPU.BHARGAVI

Verified by
D-Ravi