



SVB-GDC, KKL

ZOOLOGY PROJECT REPORT

2022

**Identifying incidence
and degree of malnutrition
in children living in
Bheemunipadu village,
Nandyala district**

**B.Z.C. Students of Second year, Batch-2
Completed this project and submitted
to the Department of Zoology**

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Community Service Project (CSP)

**Identifying incidence and degree of malnutrition in children's
living in Bheemunipadu village, Nandyala district.**

Project Submitted in Partial fulfillment for the Award of the Degree of



**BACHELOR OF SCIENCE
(BOTANY, ZOOLOGY, CHEMISTRY)**

By

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S.V.B GOVERNMENT DEGREE COLLEGE**

**(Affiliated to Rayalaseema University)
KOILAKUNTLA, Nandyala Dist.**

2021 – 2022

S.V.B GOVERNMENT DEGREE COLLEGE

(Affiliated to Rayalaseema University)

KOILAKUNTLA, Nandyala (Dt.)

CERTIFICATE

This is to certify that the Project Report titled “**Identifying incidence and degree of malnutrition in children’s living in Bheemunipadu village, Nandyala district**” was carried out by

Student Name: M. Lokesh Kumar *Hall-ticket No:*

20358041004. This is submitted in partial fulfillment for the award of the Degree of Bachelor of Science (Botany, Zoology, Chemistry) of Rayalaseema University, Kurnool, during the academic year **2021 – 2022.**

M. Ram Subb W
Signature of the Mentor

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Introduction

Bheemunipadu is a Village in Koilakuntla Mandal in Nandyala District of Andhra Pradesh State, India. It belongs to Rayalaseema region. It is located 35 KM towards South from District head quarters Nandyala. 5 KM from Koilkuntla. 382 KM from State capital Vijayawada. Bheemunipadu Pin code is 518134 and postal head office is Koilakuntla .

Agriculture is the main source in this village. There is a temple called Padmanabha swami temple. In this temple every year they celebrate the Festival called TIRUNALLA. Chickpeas are the main thing in the Agriculture. The formers in this village will not go to the Weigh Bridge, instead of that they have 'KATA' which is maintained by a Person called 'Sharabhu' who belongs to viswabrahmin (Kamsali) cast family. Sharabhu will weight all the grains. All the people will have trust on him.

Bheemunipadu 2011 Census Details

Bheemunipadu Local Language is Telugu. Bheemunipadu Village Total population is 2311 and number of houses are 649. Female Population is 50.0%. Village literacy rate is 57.2% and the Female Literacy rate is 23.0%.

Census Parameter	Census Data
Total Population	2311
Total No of Houses	649
Female Population %	50.0 % (1156)
Total Literacy rate %	57.2 % (1321)
Female Literacy rate	23.0 % (532)
Scheduled Tribes Population %	0.0 % (0)
Scheduled Caste Population %	32.4 % (749)
Working Population %	57.4 %
Child(0 -6) Population by 2011	272
Girl Child(0 -6) Population % by 2011	44.5 % (121)

Review of Literature

Every living organism requires food, which is quite essential for carrying out its physical and mental activities, growth and development. For normal growth and development, man requires some specific nutrients like carbohydrates, proteins, fats, vitamins, minerals, roughage and water in right proportion and sufficient quantity, which he gets through the food he eats. The food, which provides all these essential nutrients in proper amounts, is called balanced diet. The deficiency or even excess of any of these in a person's diet results into disorders regarding nutrition, which may be collectively, called malnutritional disorders.

The condition in which the people become weak and sick because of insufficient and unbalanced food is called malnutrition. A large no of people in our country and other developing countries suffer from malnutrition because of poverty, lack of education, wrong notions and frequent pregnancies. The main cause of malnutrition is poverty. The deficiency diseases are of three types:

1. Protein energy malnutrition (PEM)-the condition of being nourished on low protein and low energy diet is called Protein Energy Malnutrition or PEM. So, deficiency of carbohydrates, fats and proteins in PEM. It is the most important nutritional disorder affecting Indian children, in the age of period 1-3 years. The symptoms of PEM are:
 - (A) Loss in weight and height
 - (B) Poor muscular development
 - (C) Susceptible to many diseases of respiratory and gastro intestinal systems.
2. Mineral deficiency disease (Anemia, Goiter and Rickets): these are caused due to the deficiency of either iron or iodine. The symptoms are: either he will feel tiredness easily or there will be swelling in his throat region of neck. Goiter is an endemic disease (the diseases, restricted to a given reason and arising from its specific environmental condition are called endemic diseases) which is more common in hilly areas because soil of hilly areas is poor in iodine. Due to this the drinking water as well as food grown in this area is deficient in iodine. So, it leads goiter among them.
3. Vitamin deficiency disease: the diseases which are caused due to the deficiency of Vitamins in diet are called Vitamin Deficiency diseases. Some of the diseases that are caused due to the deficiency of Vitamins are Night blindness, Exophthalmia, Beri-Beri.
 - (A) Night Blindness and Xerophthalmia: these are caused due to the deficiency of Vitamin A (retinol).

(B) Beri-Beri: the deficiency of vitamin B1 causes beri-beri. Vitamin B1 is also called anti beri-beri or antineuretic factor

Types of Malnutrition

In human beings, these disorders may be classified into three categories-UNDER NUTRITION, which means the malnutrition, caused due to the availability of less food for a long period. For example slow starvation, which is found most in extremely poor or low income group people.

Excessive nutrition that means disorders developed due to overfeeding or over-eating for a long time. For example obesity. Such disorders are more evident in the families belonging to the middle class families or rich category.

Deficiency disease which are caused due to the lack of a specific nutrient in our diet. For example protein energy malnutrition, mineral deficiency diseases like anemia etc. such diseases may be found in nearly every family-rich, middle class or poor. It is thus evident that the problem of malnutrition is not confined to poor families alone but is spreading fast even in the middle and rich class families. If the increasing level of diseases in children due to the malnutrition is not taken care off than this may result into excessive weakness or obesity after a few years. We must not forget that malnutrition affects the immune system of a child which may cause frequent sickness, increase the possibility of infections from communicable diseases like cold and cough etc. So, malnutrition must be checked in the childhood itself.

Importance of studying malnutrition

Today we are living in computer age. The work that required a long time to be completed can now be done within a few seconds. In other words man is progressing in his mental abilities, but if we measure the physical standards, we will find he is becoming physically weak and now he is not so able as he used to be.

Now, the question arises what is the cause behind this physical disability, that even after attaining complete independence in the field of agriculture, children of our country are suffering from malnutrition. Malnutrition in children can prove as an obstruction in the progress of any country because today's children are tomorrow's future. Therefore for the progress of a country it is necessary that its children are healthy.

Malnutrition is found in rich and middle class families also. Although, the type and level is different from the one found in poor families still it is a serious problem.

METHODOLOGY

Methods adapted: Community survey and community awareness.

Timeline:

First week: Community survey. This includes the door-to-door survey along with the collection of data in the form of questionnaire. Different age groups are selected for the collection of data. A comparative study of occurrence of malnutrition in school children is selected for this purpose.

Second week: Community awareness. Under this programme, an attempt to create the awareness regarding the malnutrition has been made by the team members individually. Different class students are addressed separately for this purpose.

Third week: All the data collected has been compiled in the form of project report. This includes the analysis of data. Based on this, definite conclusions are drawn regarding the prevalence of the disease. This includes the graphical representation of the data.

Fourth week: It includes the presentation of our project work to the internal viva committee at the college level individually.

DATA COLLECTION

Students of the college visited Bheemunipadu village and reached Govt. school to collect data. Weighing machine, tape are used in this project, the formats listed below are used for collecting data and drawing conclusions.

1. Questionnaire
2. Tabular columns
3. Graphical representations.

**SVB GOVERNMENT DEGREE COLLEGE
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Questionnaire

Name of the student:

Name of the faculty mentor:

Name of the villager:

	Question	
1	Which class you are studying?	
2	Do you have habit of taking junk food?	
3	What is your age?	
4	Specify the gender?	
5	What type of food you are eating every day?	
6	At what time you wake up in the morning?	
7	At what time you go to sleep at night?	

8	How frequently you check your weight?	
9	How much time do you spend in a day watching TV/Mobiles?	
10	Are you doing home work regularly?	
11	How frequently you take outside food?	
12	Is there any family history of diseases?	
13	Which food you like more?	
14	Are you taking egg in your diet regularly?	
15	Do you like panipuri?	
16	Do you know about malnutrition?	

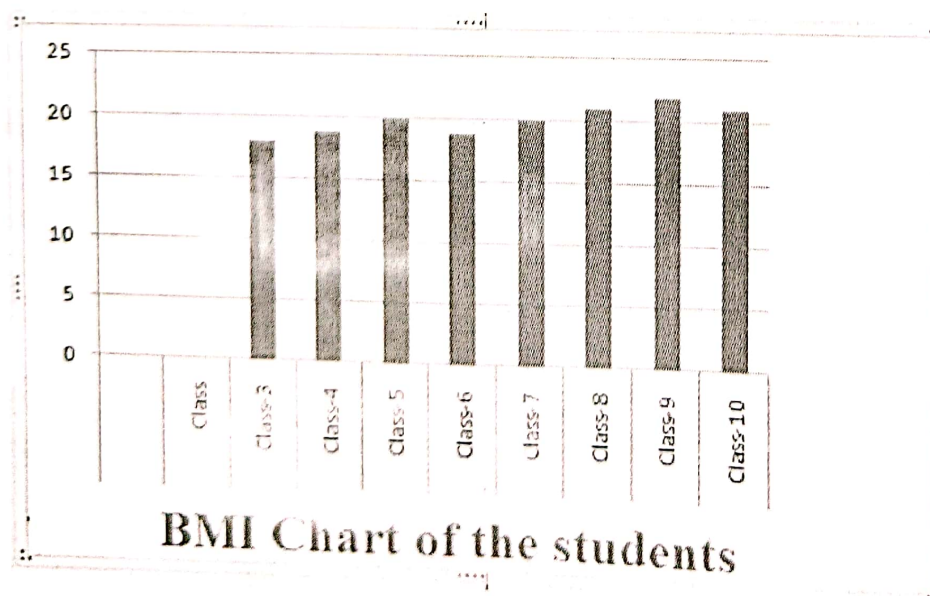
S.No.	CHILD ID	CHILD NAME	STUDYING CLASS	SECTION	GENDER	HEIGHT	WEIGHT
1	2041107440	GAJULA REHAN HUSSAIN	3	A	MALE	3.7	18.1
2	2041107447	KAMPAMALLA HUSSAINA AIREEN	3	A	FEMALE	3.6	16.7
3	2041107459	NALLAMANDU NANDINI	3	A	FEMALE	3.8	18.1
4	2041107466	TAMBALI MANJULA	3	A	FEMALE	3.5	15.2
5	2041118631	EDIGE GURUMOHAN	3	A	MALE	3.6	14.7
6	1911005213	DESETTY SRI VIDYA	4	A	FEMALE	4.2	23
7	1911005220	MANGALI VEERA BHAVANI	4	A	FEMALE	3.7	18.9
8	1911005228	MULINTI LAKSHMI VARUN	4	A	MALE	4.2	24.7
9	1911005236	PULA MAMMAD	4	A	MALE	3.9	18.9
10	1911005295	SURATI SIVA KEERTHI	4	A	FEMALE	3.9	17.8
11	1911005317	VEPALAGARI UDAY KIRAN	4	A	MALE	4.2	21.5
12	2041157586	DUDEKULA KRUTHIKA	4	A	FEMALE	3.9	18.8
13	1811007901	SHAIK ASIYA	5	A	FEMALE	4.3	21.5
14	1811009257	SARABU VENKATA UDAY CHARAN	5	A	MALE	3.9	18.8
15	1811009258	TABALA VYSHNAVI	5	A	FEMALE	4	21.2
16	1811009259	MINGI VENKATA SREEKANTH GOUD	5	A	MALE	4.6	25.8
17	1811014385	BODANAM SUSMANATH ACHARI	5	A	MALE	4.5	23.8
18	1811018369	EDIGA MAHIDHAR GOUD	5	A	MALE	4.2	21.4
19	1811018373	VADDE HYMAVATHI	5	A	FEMALE	4.2	22.5
20	1811024900	DUDEKULA TURPUNATI USHALINI	5	A	FEMALE	4.7	34.5
21	1811024901	DUDEKULA TURPUNATI HUSSAIN BE	5	A	FEMALE	4.3	30.9
22	1811044624	DUDEKULA PUNITH KUMAR	5	A	MALE	4.4	30
23	1811056016	MANGALI MADHU PRIYA	5	A	FEMALE	4	25
24	1911014565	TALARI JAHNAVI	5	A	FEMALE	4.2	20.6
25	1611006896	DABBAGALLA MAHA LAKSHMI	6	A	FEMALE	4.3	25
26	1611018685	PASUPULA SUSHANTH	6	A	MALE	4.2	21
27	1611061322	PUJARI UDAY KUMAR	6	A	MALE	5	35
28	1711016370	BARIGELA SATISH KUMAR	6	A	MALE	4.4	29
29	1711033028	PUJARI SHANTHI	6	A	FEMALE	3.9	28
30	1711033361	KAMPAMALLA MOHAMMAD HUSSAIN BASHA	6	A	MALE	4.4	32
31	1711042565	LINGALDINNE MAA BASHA	6	A	MALE	4.5	35
32	1711045941	PUJARI CHANDHAN RAJ	6	A	MALE	4.6	35
33	1711047270	CHAKALI BHAGYA LAKSHMI	6	A	FEMALE	4.3	26.3
34	1711047287	POOLA ABDUL GAFUR	6	A	MALE	4.3	26.3
35	1711053283	CHAKALI NAVEEN	6	A	MALE	4.3	28
36	1711054706	MOOLINTI LAKSHMIKUMARI	6	A	FEMALE	4.6	44.3
37	1711054718	KAMPAMALLA SHAHIN	6	A	FEMALE	4.6	41.8
38	1711057125	BHIMUNIPATI ASHA BI	6	A	FEMALE	4.4	23.2
39	1711082004	AMADALA SONI	6	A	FEMALE	4.4	30
40	1711083786	KARNATI HEMALATHA	6	A	FEMALE	4.6	43.3
41	1811004641	BANGI VISHNUVARDHAN	6	A	MALE	5.1	49.8
42	1811007169	EDIGA MEGHANA	6	A	FEMALE	4.3	27
43	1511728188	PASUPALA MADHU SEKSHA	7	A	MALE	4.4	32
44	1610029272	TIRUPALADENNE MD LATHIF	7	A	MALE	4.4	25.2
45	1611001653	NEGHALA KAVITHA	7	A	FEMALE	4.5	29.9

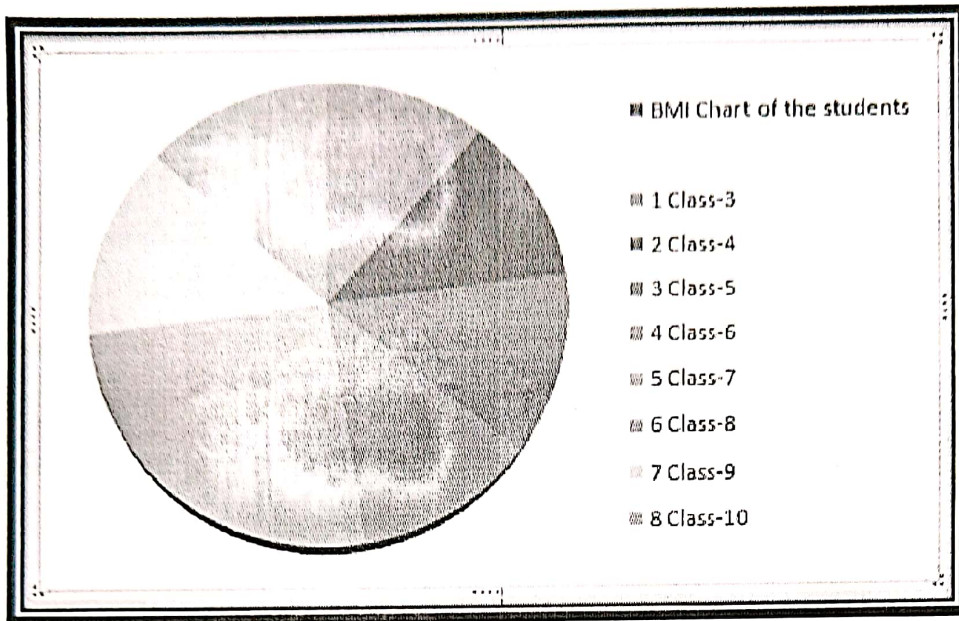
46	1611004099	GUNDUMALLA SUBHASH	7	A	MALE	4.7	29.9
47	1611006400	SHAIK AFREEN	7	A	FEMALE	4.6	32
48	1611006437	SRIRAMULA ANOK	7	A	MALE	4.3	31.4
49	1611007405	SHAIK HASMIN	7	A	FEMALE	4.3	31.4
50	1611009630	PUJARI ADITYA	7	A	MALE	4.5	30
51	1611012586	TALARI VISHNU VARDHAN	7	A	MALE	5.1	40.8
52	1611018152	PONNAMPALLI HUSSAINA BEE	7	A	FEMALE	4.6	30.9
53	1611018652	CHAKALI PADMAJA	7	A	FEMALE	3.9	40.2
54	1611019797	JOGI CHANDRAHAS	7	A	MALE	4.2	38
55	1611031159	VADDE YUGANDHAR	7	A	MALE	4.4	25
56	1611034133	VADDE SUNITHA	7	A	FEMALE	4.3	38
57	1611054194	YERROLLA KAVYA	7	A	FEMALE	4.8	44
58	1611055801	PALLE RENUKA DEVI	7	A	FEMALE	4.5	31.4
59	1611065497	TAMMALI VEERESH	7	A	MALE	4.6	34.5
60	1611091362	SHAIK REHAN	7	A	MALE	4.2	35.3
61	1910044339	TALARI SAI PUJITHA	7	A	FEMALE	4.9	37.8
62	1511216271	MULINTI BHARATHI DEVI	8	A	FEMALE	4.3	35
63	1511264768	KONDA SUNKESULA BALAJI	8	A	MALE	5.4	38.6
64	1511517309	BARIGELLA DEVAMAHI	8	A	FEMALE	4.7	37.6
65	1511531786	YERROLLA ASHOK KUMAR	8	A	MALE	4.4	26.2
66	1511531799	PIDATALA PALLAVI	8	A	FEMALE	4.4	25.9
67	1511531822	PUJARI VISHNU VARDHAN	8	A	MALE	4.7	46.2
68	1511533926	KAMPAMALLA SHAIK HUSSAIN VALI	8	A	MALE	4.7	39.9
69	1511533946	DESHETTI USHA RANI	8	A	FEMALE	4.6	30.1
70	1511533956	DESHETTI SUMITRA DEVI	8	A	FEMALE	4.4	23.4
71	1511535066	VEMULA UMADEVI	8	A	FEMALE	4.6	33.5
72	1511560168	PALLE KIRANKUMAR REDDY	8	A	MALE	4.9	34.7
73	1511601031	DUDEKULA SIDDIAH	8	A	MALE	5.1	37.2
74	1511601041	CHAKALI PAVANI	8	A	FEMALE	4.6	41.4
75	1511601375	MATTA HEPSIBA	8	A	FEMALE	4.5	35.2
76	1611054761	NABISAB GARI MABU HUSSAIN	8	A	MALE	5.3	35.2
77	1611096164	SHAIK HUSSAIN BASHA	8	A	MALE	4.8	36.6
78	1511251515	M.BARATHI DEVI	9	A	MALE	4.7	61
79	1511252838	PUJARI JAGAN	9	A	MALE	5.8	40.1
80	1511252841	PUJARI JEEVITHA	9	A	FEMALE	4.5	28.5
81	1511252843	NEGALA SONI	9	A	FEMALE	4.8	38.6
82	1511252855	JOGI GOWRI LOKESH	9	A	MALE	AB	AB
83	1511252856	JOGI VENKATA SAI	9	A	MALE	AB	AB
84	1511252862	PEDATHALA SUSHANTH	9	A	MALE	5.3	45.2
85	1511252867	GUNDURU VISHNU	9	A	MALE	5.3	35.2
86	1511252871	NEGALA RAJU	9	A	MALE	AB	AB
87	1511252989	OWK MAHAMMAD GOUSE	9	A	MALE	AB	AB
88	1511252992	MEKALA VIKARAM SAI	9	A	MALE	4.7	40.2
89	1511259201	THURPUNATI HUSSAIN VALI	9	A	MALE	4.7	35.7
90	1511259211	PONNAMPALLI SAMEERA	9	A	FEMALE	5	58.8
91	1511259216	VADDE ANJALI	9	A	FEMALE	AB	AB
92	1511259221	VADDE PURANDESWARI	9	A	FEMALE	4.9	43.9
93	1511259237	DESETTI DEVANANDINI	9	A	FEMALE	4.4	38.9

94	1511259244	MANGALI SUMATHI	9	A	FEMALE	4.7	36.9
95	1511259254	DUDEKULA SIDDU	9	A	MALE	4.8	38
96	1511259262	PONNAMPALLI KAMALBI	9	A	FEMALE	4.7	41.6
97	1511264770	NARSIPALLI NAGAVIJAYA	9	A	FEMALE	5.2	41.6
98	1511264771	KONKA HARSHAVARDHAN	9	A	MALE	4.5	27.3
99	1511264772	MANGALI PADMAVATHI	9	A	FEMALE	4.4	24.3
100	1511264773	SHAIK NOOR MAHAMMAD	9	A	MALE	5.5	69.9
101	1511267216	SREERAMULLA YASHODA	9	A	FEMALE	AB	AB
102	1511269635	SREERAMULA MANOJ KUMAR	9	A	MALE	AB	AB
103	1511269647	SREERAMULA CHARAN	9	A	MALE	AB	AB
104	1511269687	SREERAMULA CHARLESS	9	A	MALE	AB	AB
105	1511269696	SREERAMULA PULLAIAH	9	A	MALE	5	46.8
106	1511269703	SREERAMULA RAJU	9	A	MALE	AB	AB
107	1511321732	DOODEKULA MOULI DASTAGIRI	9	A	MALE	4.5	39.4
108	1511422523	KAMPAMALLA MABU HUSSAIN	9	A	MALE	5.3	39.4
109	1511510869	TALARI CHANDRAKALA	9	A	FEMALE	AB	AB
110	1511573119	EDIGA MANI TEJA	9	A	FEMALE	4.3	25.7
111	1511619083	MODDUGALLA SANJITH	9	A	MALE	5.3	34.8
112	1511662219	KAMPAMALLA RESHMA	9	A	FEMALE	4.2	35
113	1711096435	SHAIK SAJUN	9	A	FEMALE	AB	AB
114	1811052170	BANGI VISHNAVI	9	A	FEMALE	4.4	30.2
115	1511099080	SRIRAMULA CHANDRAKALA	10	A	FEMALE	AB	AB
116	1511099164	PIDATALA ARUNAKUMARI	10	A	FEMALE	AB	AB
117	1511099193	BARIGELA LAVANYA	10	A	FEMALE	4.9	53
118	1511099204	PIDATALA SUPRIYA	10	A	FEMALE	5.1	33.5
119	1511099210	JOGI PARAMESWARI	10	A	FEMALE	5.1	47.9
120	1511108040	INENI KALPANA	10	A	FEMALE	4.9	40.2
121	1511113518	CHAKALI VENKATATEJA	10	A	MALE	5.8	71.6
122	1511126332	DUDEKULA ANWAR HUSSAIN	10	A	MALE	5.3	53.4
123	1511126376	GUNDUMALLA NAGA SUBBARAYUDU	10	A	MALE	5.4	40.1
124	1511126380	SHARIFSHAGARI HUSSAIAH VALI	10	A	MALE	5.6	44.5
125	1511126385	DWARA NAGAJYOTHI	10	A	FEMALE	4.9	34.7
126	1511126449	LAKA VENKATASUHASINI	10	A	FEMALE	AB	AB
127	1511126453	SUDDAPALLE MYBHUN	10	A	FEMALE	4.8	40
128	1511126457	KALUGOTLA KYRUSHMA	10	A	FEMALE	4.7	34.7
129	1511126462	GOOTUPALLI RASHEEDA	10	A	FEMALE	4.8	45.6
130	1511126544	MANGALI MEGHASRAVANI	10	A	FEMALE	4.7	34.9
131	1511126572	DASUGARI MANICHANDRA	10	A	MALE	5.5	40.2
132	1511264767	DUDEKULA SUMATI	10	A	FEMALE	4.6	65.9
133	1511360723	CHAKALI ROJA	10	A	FEMALE	4.5	26.3
134	1511533935	MANGALI GOVARDHAN	10	A	MALE	5.2	35.9
135	1511572071	EDIGA MANASA	10	A	FEMALE	5.1	36.7
136	1511602354	SHAIK TASLEM	10	A	FEMALE	4.7	51.3
137	1811065511	SAYYAD MUBINNA	10	A	FEMALE	4.9	40.2
138	1911075505	CHAKALI VAISHNAVI	10	A	FEMALE	4.9	39.9

Graphical Representation of data

BMI Chart of the students		
S.No.	Class	BMI
1	Class-3	18
2	Class-4	19
3	Class-5	20
4	Class-6	19
5	Class-7	20
6	Class-8	21
7	Class-9	22
8	Class-10	21





DATA ANALYSIS

There are two reasons for Malnutrition in middle and high school students

1. Inbalanced diet
2. Ignorance of wrong food habits in children by parents.

It is also found that some parents are totally unaware of what a balanced diet should consist of. They don't know the importance of balanced diet. They only care that their children eat adequate diet.

If child wants to eat chips, samosas, maggi, Noodles, pastries, their parents do not resist. Parents themselves also eat junk food and allow their children also.

Children don't want to eat green vegetables. They only prefer food items made of potatoes which increases their weight. Cold drinks, chocolates, coffee etc. that give sufficient calories but don't give nutrition.

Therefore, parents need to improve food habits of their children. They should take balanced diet.

Earlier boys and girls were treated differently. So, girls were found to suffer from malnutrition. But, today that is not the case.

Suggestions for preventions

Malnutrition in children is a major obstruction in progress of a nation. In our country about 60% children are suffering from malnutrition. Therefore, it is very important to eradicate this problem completely. After working on this project we suggest the following ways to prevent malnutrition:

1. Guardians, themselves must change their food style, as children learn their food habits from their home.
2. Mothers should breast feed their children for adequate period.
3. Children should be provided medical checkup from time to time.
4. Teachers must give information to students on how to prevent disease from malnutrition.

5. All the people should eat the food which is sufficiently boiled.

What we came to know after preparing this project

All the data collected for the project revealed that most of the children suffer from malnutrition due to their wrong food habits and eating imbalanced diet. If the parents show a little concern towards their children, this problem can also be eradicated. Meetings between parents, teachers and child specialist doctors would be of much help in solving this problem. All these steps should be taken in a hurry because today's children are tomorrow's future.

Collected data

In a survey which was held in our own school last year, it came to light that:

1. only 5% students in the age group of 8-10 years like green vegetables.
2. 3% students like pulses.
3. only 2% students like milk.
4. 5% students like fruits.
5. 40% students like maggi, Noodles.
6. 40% students like cold drink.
7. 5% students like juice.

In this survey study of malnutrition in students was done according to the weight of the children. It was found that 15% children are weighing above the normal weight, 70% children are weighing the normal weight and only 15% children are found with the below normal weight.

Also in this survey it was found that 80% students have low frequency of infection while 20% students have high frequency of infection.

Also the activities of the children were examined and were observed which revealed that 25% children were lazy while 75% were found active.

References

1. Contemporary issues in childhood malnutrition by Jyothi Ratan Ghose
2. What is malnutrition by L. Roberts
3. Malnutrition and school feeding by John Charles Gebhart
4. India's Undernourished Children : A Call for Reform and Action by Michele Gragnolati, Caryn Bredenkamp, Meera Shekar, Monica Das Gupta, Yi-Kyoung Lee

Web links

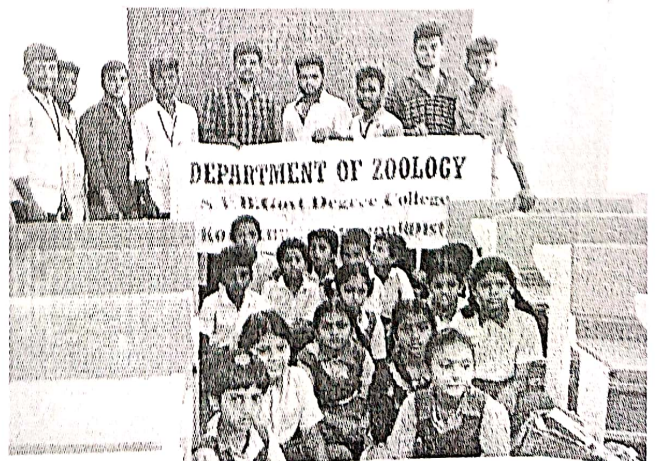
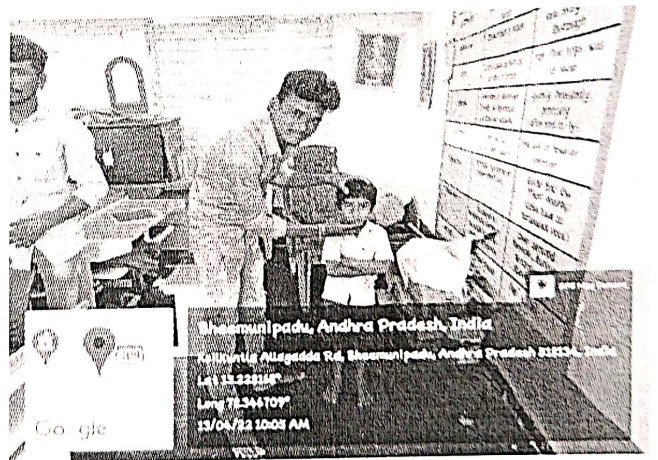
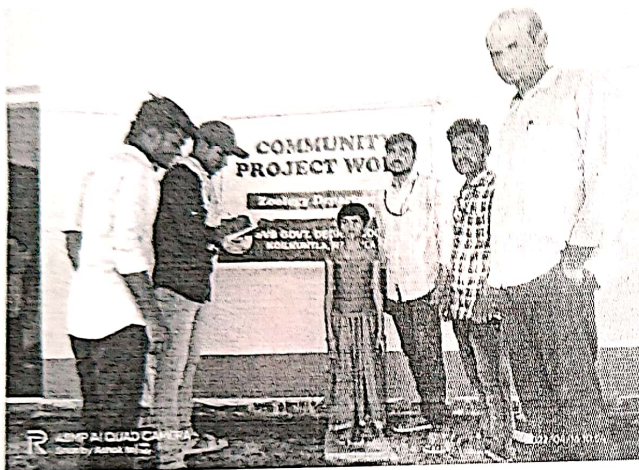
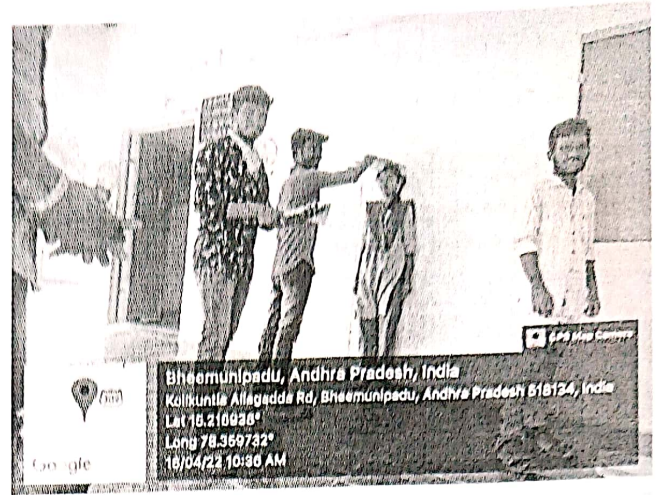
https://www.who.int/health-topics/malnutrition#tab=tab_1

<https://www.who.int/news-room/fact-sheets/detail/malnutrition#:~:text=There%20are%204%20broad%20sub,deficiencies%20in%20vitamins%20and%20minerals.>

http://conflict.lshtm.ac.uk/page_115.htm

<https://my.clevelandclinic.org/health/diseases/22987-malnutrition>

Community Service Project Photos - Bheemunipadu Village



EVALUATION

Page No:



Student Self-Evaluation for the Community Service Project

Student Name: M. Lokesh Kumar

Registration No: 20358041004

Period of CSP: From: To: 13-04-2022 — 12-06-2022

Date of Evaluation: 10-11-2022

Please rate your performance in the following areas:

Rating Scale: Letter grade of CGPA calculation to be provided

1	Oral communication	1	2	3	4	5
2	Written communication	1	2	3	4	5
3	Proactiveness	1	2	3	4	5
4	Interaction ability with community	1	2	3	4	5
5	Positive Attitude	1	2	3	4	5
6	Self-confidence	1	2	3	4	5
7	Ability to learn	1	2	3	4	5
8	Work Plan and organization	1	2	3	4	5
9	Professionalism	1	2	3	4	5
10	Creativity	1	2	3	4	5
11	Quality of work done	1	2	3	4	5
12	Time Management	1	2	3	4	5
13	Understanding the Community	1	2	3	4	5
14	Achievement of Desired Outcomes	1	2	3	4	5
15	OVERALL PERFORMANCE	1	2	3	4	5

Date:

M. Lokesh Kumar

Signature of the Student

Evaluation by the Person in-charge in the Community/Habitation

Student Name: M. Lokesh Kumar

Registration No: 203580241004

Period of CSP: From: To: 13-04-2022 - 12-06-2022

Date of Evaluation: 10-11-2022

Name of the Person in-charge:

Address with mobile number:

Please rate the student's performance in the following areas:

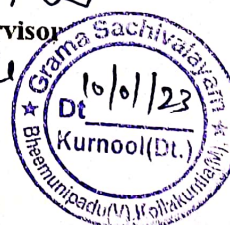
Please note that your evaluation shall be done independent of the Student's self-evaluation

Rating Scale: 1 is lowest and 5 is highest rank

1	Oral communication	1	2	③	4	5
2	Written communication	1	②	3	4	5
3	Proactiveness	1	2	③	4	5
4	Interaction ability with community	1	2	3	④	5
5	Positive Attitude	1	2	③	4	5
6	Self-confidence	1	2	3	④	5
7	Ability to learn	1	②	3	4	5
8	Work Plan and organization	1	2	③	4	5
9	Professionalism	1	2	3	④	5
10	Creativity	1	2	③	4	5
11	Quality of work done	1	2	3	④	5
12	Time Management	1	2	③	4	5
13	Understanding the Community	1	2	3	④	5
14	Achievement of Desired Outcomes	1	2	③	4	5
15	OVERALL PERFORMANCE	1	2	③	4	5

Date: 20/12/2022

H. Ravi Sankar
Signature of the Supervisor
K. Sankar



Page No:

INTERNAL ASSESSMENT STATEMENT

Name Of the Student: M. Lokesh Kumar
Programme of Study: B.Sc. Malnutrition.
Year of Study: 2021-2023
Group: BSC(B.Z.C)
Register No/H.T. No: 20358041004
Name of the College: S.V.B. Govt degree college Koilkuntla
University: Rayalaseema University

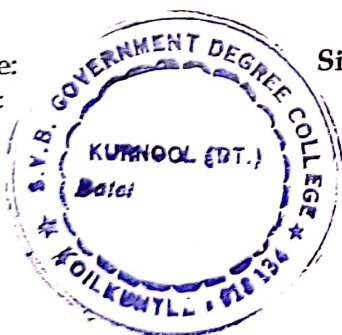
SLNo	Evaluation Criterion	Maximum Marks	Marks Awarded
1.	Activity Log	20	15
2.	Community Service Project Implementation	30	20
3.	Mini Project Work	25	15
4.	Oral Presentation	25	18
	GRAND TOTAL	100	68

Date: 22/12/2022

M. Ramesh Babu
Signature of the Faculty Guide

Certified by

Date:
Seal:



Signature of the Head of the Department/Principal

S.V.B. GOVT. DEGREE COLLEGE
KOILKUNTLA, NANDYAL (D.T.)

Page No:

