

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



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)

 B_V

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Under the esteemed guidance of

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Lecturer in Zoology

DEPARTMENT OF ZOOLOGY

S.V.B GOVERNMENT DEGREE COLLEGE

(Affiliated to Rayalaseema University)

KOILAKUNTLA, Nandyala Dist.

2021 - 2022

S.V.B GOVERNMENT DEGREE COLLEGE

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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 Alok Hall-ticket No: Name: Student 2035 Coch 1001. 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 Sto M

Signature of the Mentor



- 1. Introduction
- 2. Review of Literature
- 3. Methodology
- 4. Data collection
- 5. Diagrammatic Representation
- 6. Data Analysis
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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 201	1 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:

- 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 overeating 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.

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Questionnaire

Name of the student:

Name of the faculty mentor:

Name of the villager:

SINO	Question	
	Which class you are studying?	
1		
2	Do you have habit of taking junk food?	
3	What is your age?	
y 8	Specify the gender?	
	What type of food you are eating every day?	
, A	t what time you wake up in the morning?	
Aı	t what time you go to sleep at night?	

8	How frequently you check your weight?	
0		
7	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?	
r	Do you like panipuri?	Y
16	Do you know about malnutrition?	

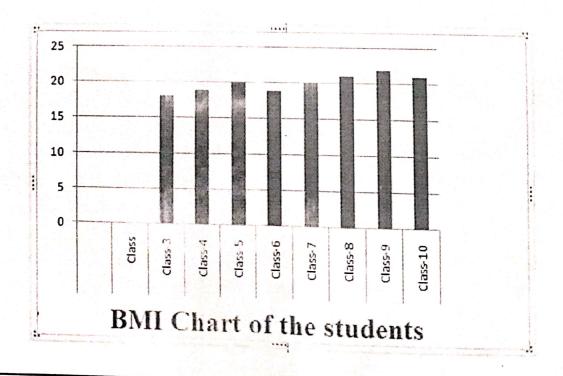
S.	No. CHILD ID	CHILD NAME	STUDYING	SECTION	GENDER	HEIGHT	WEIGHT
H	1 2041107440	GAJULA REHAN HUSSAIN	3	٨	MALE	3.7	18.1
-	2 2041107447	KAMPAMALLA HUSSAINA AFREEN	3	٨	FEMALE	3.6	16.7
H	3 2041107459		3	٨	FEMALE	3.8	18.1
\vdash	4 2041107466	TAMBALI MANJULA	3	Α	FEMALE	3.5	15.2
H	5 2041118631	EDIGE GURUMOHAN	3	Α	MALE	3.6	14,7
Г	6 1911005213	DESETTY SRI VIDYA	4	Α	FEMALE	4.2	23
	7 1911005220	MANGALI VEERA BHAVANI	4	Α	FEMALE	3.7	18.9
-	8 1911005228	MULINTI LAKSHMI VARUN	4	Α	MALE	4.2	24.7
9	1911005236	PULA MAMMAD	4	Α	MALE	3.9	18.9
10	1911005295	SURATI SIVA KEERTHI	4	Α	FEMALE	3.9	17.8
11	1911005317	VEPALAGARI UDAY KIRAN	4	Α	MALE	4.2	21.5
12	2041157586	DUDEKULA KRUTHIKA	4	Α	FEMALE	3.9	18.8
13	1811007901	SHAIK ASIYA	5	Α	FEMALE	4.3	21.5
14	1811009257	SARABU VENKATA UDAY CHARAN	5	Α	MALE	3.9	18.8
15	1811009258	TABALA VYSHNAVI	5	A	FEMALE	4	21.2
16	1811009259	MINGI VENKATA SREEKANTH GOUD	5	Α	MALE	4.6	25.8
17	1811014385	BODANAM SUSMANTH ACHARI	5	Α	MALE	4.5	23.8
18	1811018369	EDIGA MAHIDHAR GOUD	5	Α	MALE	4.2	21.4
19	1811018373	VADDE HYMAVATHI	5	Α	FEMALE	4.2	22.5
20	1811024900	DUDEKULA TURPUNATI USHALINI	5	Α	FEMALE	4.7	34.5
21	1811024901	DUDEKULA TURPUNATI HUSSAIN BE	5	Α	FEMALE	4.3	30.9
22	1811044624	DUDEKULA PUNITH KUMAR	5	Α Α	MALE	4.4	30
23	1811056016	MANGALI MADHU PRIYA	5	Α	FEMALE	4	25
4	1911014565	TALARI JAHNAVI	5	Α	FEMALE	4.2	20.6
5	1611006896	DABBAGALLA MAHA LAKSHMI	6	Α	FEMALE	4.3	25
6	1611018685	PASUPULA SUSHANTH	6	Α	MALE	4.2	21
7	1611061322	PUJARI UDAY KUMAR	6	Α	MALE	5	35
8	1711016370	BARIGELA SATISH KUMAR	6	Α	MALE	4.4	29
1	1711033028	PUJARI SHANTHI	6	A	FEMALE	3.9	
T		KAMPAMALLA MOHAMMAD HUSSAIN		1 10	7 - 7 - 7	3.5	28
	1711033361	BASHA	6	Α	MALE	4.4	32
	1711042565	INGALDINNE MAA BASHA	6	А	MALE	4.5	35
	1711045941	PUJARI CHANDHAN RAJ	6	Α	MALE	4.6	
	1711047270	HAKALI BHAGYA LAKSHMI	6	Α	FEMALE		35
-	1711047287 F	OOLA ABDUL GAFUR	6	Α	MALE	4.3	26.3
7	1711053283	HAKALI NAVEEN	6	A	MALE	4.3	26.3
1	1711054706 N	100LINTI LAKSHMIKUMARI	6	A		4.3	28
1		AMPAMALLA SHAHIN	6	The Table of the Control	FEMALE	4.6	44.
1		HIMUNIPATI ASHA BI	6	Α	FEMALE	4.6	41.
1		MADALA SONI		Α	FEMALE	4.4	23.
		ARNATI HEMALATHA	6	Α	FEMALE	4.4	30
		ANGI VISHNUVARDHAN	6	Α	FEMALE	4.6	43.
		DIGA MEGHANA	6	Α	MALE	5.1	49.
		SUPALA MADHU SEKSHA	6	Α	FEMALE		
			7	Α	MALE	4.3	27
_		RUPALADENNE MD LATHIF GHALA KAVITHA	7	Α	MALE	4.4	32
	INI ECOLUULA	UMAI A KAVII HA	7		******	4.4	25.

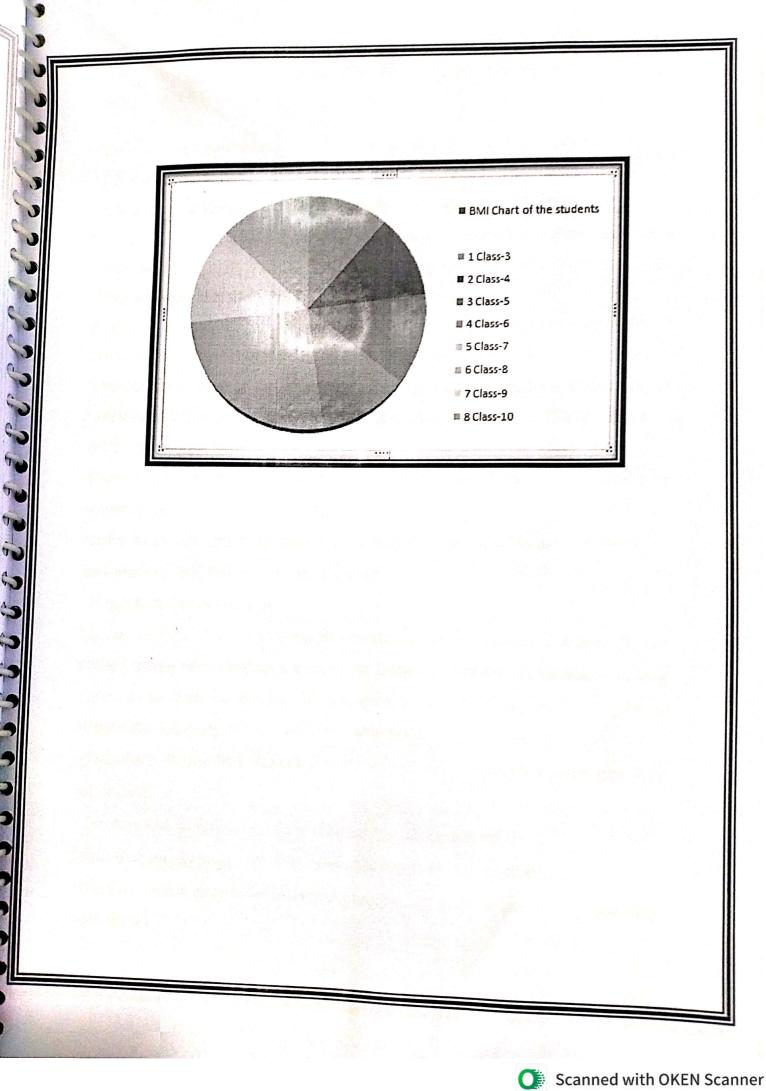
	46 16110	004099	GUNDUMALLA SUBHASH	7	I A	MALE	1	T 20.
0	47 16110	006400		7	A	FEMALE	4.7	29.9
	48 16110	006437	SRIRAMULA ANOK	7	A	MALE	4.6	32
	49 16110	07405	SHAIK HASMIN	7	A	FEMALE	4.3	31.
J	50 16110	09630	PUJARI ADITYA	7	A	MALE	4.5	30
	51 16110	12586	TALARI VISHNU VARDHAN	7	А	MALE	5.1	40.
0	52 16110	18152	PONNAMPALLI HUSSAINA BEE	7	А	FEMALE	4.6	30.
U	53 16110		CHAKALI PADMAJA	7	Α	FEMALE	3.9	40.
	54 161102	19797	JOGI CHANDRAHAS	7	А	MALE	4.2	38
9	55 161103		VADDE YUGANDHAR	7	А	MALE	4.4	25
	56 161103	34133	VADDE SUNITHA	7	А	FEMALE	4.3	38
	57 161105	4194	YERROLLA KAVYA	7	А	FEMALE	4.8	44
	58 161105		PALLE RENUKA DEVI	7	Α	FEMALE	4.5	31.
	59 161106		TAMMALI VEERESH	7	Α	MALE	4.6	34.
	60 161109		SHAIK REHAN	7	Α	MALE	4.2	35.
	61 1910044		TALARI SAI PUJITHA	7	А	FEMALE	4.9	37.
	62 1511216		MULINTI BHARATHI DEVI	8	А	FEMALE	4.3	35
L	63 1511264		KONDA SUNKESULA BALAJI	8	А	MALE	5.4	38.
	64 1511517		BARIGELLA DEVAMAHI	8	А	FEMALE	4.7	37.
L	65 1511531		yerrolla ashok kumar	8	А	MALE	4.4	26.
L	66 1511531		PIDATALA PALLAVI	8	А	FEMALE	4.4	25.
	67 15115318		PUJARI VISHNU VARDHAN	8	А	MALE	4.7	46.
 	58 15115339		KAMPAMALLA SHAIK HUSSAIN VALI	8	Α	MALE	4.7	39.
_	59 15115339		DESHETTI USHA RANI	8	A	FEMALE	4.6	30.
_	0 15115339		PESHETTI SUMITRA DEVI	8	A	FEMALE	4.4	23.
17			EMULA UMADEVI	8	A	FEMALE	4.6	33.
7:		-	ALLE KIRANKUMAR REDDY	8	А	MALE	4.9	34.
73			UDEKULA SIDDAIAH	8	Α	MALE	5.1	37.
74			HAKALI PAVANI	8	А	FEMALE	4.6	41.
75			ATTA HEPSIBA	8	А	FEMALE	4.5	35.
76			ABISAB GARI MABU HUSSAIN	8	А	MALE	5.3	35.
77			AIK HUSSAIN BASHA	8	A	MALE	4.8	
78	151125151	5 M.	BARATHI DEVI	9	A	MALE	4.7	36.
79	1511252838		JARI JAGAN	9	Α	MALE		61
80	1511252841	L PUJ	IARI JEEVITHA	9	Α	FEMALE	5.8	40.
81	1511252843		GALA SONI	9	A	FEMALE	4.5	28.
82	1511252855	JOG	I GOWRI LOKESH	9	A	MALE	4.8	38.
83	1511252856	JOG	I VENKATA SAI	9	A		AB	AE
84	1511252862	PED	ATHALA SUSHANTH	9		MALE	AB	AE
85	1511252867	GUN	DURU VISHNU	9	A	MALE	5.3	45.
86	1511252871		ALA RAJU		Α	MALE	5.3	35.
87	1511252989		MAHAMMAD GOUSE	9	Α	MALE	AB	AE
_	1511252992		ALA VIKARAM SAI	9	Α	MALE	AB	AB
_	1511259201	_		9	Α	MALE	4.7	
	1511259211		RPUNATI HUSSAIAN VALI	9	Α	MALE		40.
			NAMPALLI SAMEERA	9	Α	FEMALE	4.7	35.
	1511259216		E ANJALI	9	A	100	5	58.8
_	511259221		E PURANDESWARI	9	A	FEMALE	AB	AB
3 1	511259237	DESET	TI DEVANANDINI	9		FEMALE	4.9	43.5
				- AND - CA	A	FEMALE	4.4	38.5

9	94 1511259	244 MANGALI SUMATHI					
2	95 1511259		9	Α	FEMALE	4.7	36.9
	96 1511259		9	Α	MALE	4.8	38
•	97 1511264	THE THE PERSON NAMED IN	9	Α	FEMALE	4.7	41.6
	98 15112647		9	Α	FEMALE	5.2	41.6
TAN 1	99 15112647		9	^	MALE	4.5	27.3
•	100 15112647	THE PROPERTY OF THE PARTY OF TH	9	A	FEMALE	4.4	24.3
	101 15112672	THE STATE OF THE S	9	A	MALE	5.5	69.9
	102 15112696	The state of the s	9	A	FEMALE	AB	AB
	103 15112696		9	A	MALE	AB	AB
	104 15112696		9	Α	MALE	AB	АВ
	105 15112696		9	Α	MALE	AB	AB
· F	106 15112697	- THE TOTAL OF THE	9	Α	MALE	5	46.8
г.	15113217		9	Α	MALE	AB	AB
' -	08 15114225	The state of the s	9	Α	MALE	4.5	39.4
- H	09 151151086	TO STATE OF THE PROPERTY OF TH	9	А	MALE	5.3	39.4
· -	151157311	THE WITCHANDRAKALA	9	Α	FEMALE	AB	AB
11		The state of the s	9	А	FEMALE	4.3	25.7
11		THE DESCRIPTION OF THE PROPERTY OF THE PROPERT	9	А	MALE	5.3	34.8
111		THE STATE OF THE S	9	A	FEMALE	4.2	35
11.	2. 2205045	STATE SASON	9	Α	FEMALE	AB	AB
115	-01103217	THE VISITIAN	9	А	FEMALE	4.4	30.2
_	-522055000	THE WOOD CHANGE	10	Α	FEMALE	AB	AB
116		THE ARCHARDINARI	10	Α	FEMALE	AB	AB
117		- WOLD LD LAND	10	Α	FEMALE	4.9	53
118			10	Α	FEMALE	5.1	33.5
119	1511099210		10	А	FEMALE	5.1	47.9
120	1511108040		10	А	FEMALE	4.9	
121	1511113518	CHAKALI VENKATATEJA	10	А	MALE	5.8	40.2
122	1511126332	DUDEKULA ANWAR HUSSAIN	10	Α	MALE		71.6
123	1511126376	GUNDUMALLA NAGA SUBBARAYUDU	10	А	MALE	5.3 5.4	53.4
124	1511126380	SHARIFSHAGARI HUSSAIAN VALI	10	A	MALE		
125	1511126385	DWARA NAGAJYOTHI	10			5.6	44.5
126	1511126449	LAKA VENKATASUHASINI	10	Α	FEMALE	4.9	34.7
127	1511126453	SUDDAPALLE MYBHUN	10	A	FEMALE	AB	AB
128	1511126457	KALUGOTLA KYRUSHMA		A	FEMALE	4.8	40
129	1511126462	GOOTUPALLI RASHEEDA	10	Α	FEMALE	4.7	34.7
130	1511126544		10	Α	FEMALE	4.8	45.6
-		MANGALI MEGHASRAVANI	10	Α	FEMALE	4.7	34.9
131	1511126572	DASUGARI MANICHANDRA	10	Α	MALE	5.5	40.2.
132	1511264767	DUDEKULA SUMATI	10	Α	FEMALE		
33	1511360723	CHAKALI ROJA	10	Α	FEMALE	4.6	65.9
34	1511533935	MANGALI GOVARDHAN	10	A		4.5	26.3
35	1511572071	EDIGA MANASA	10		MALE	5.2	35.9
36	1511602354	SHAIK TASLEM	10	Α Α	FEMALE	5.1	36.7
37	1811065511	SAYYAD MUBINNA		Α	FEMALE	4.7	51.3
38		CHAKALI VAISHNAVI	10	Α	FEMALE	4.9	40.2
		7,171	10	Α	FEMALE	4.9	39.9

Graphical Representation of data

BMI Chart of the students						
S.No.	Class	вмі				
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 schoolstudents

- 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 magi, 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

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- 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

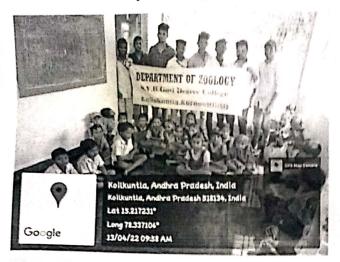
https://www.who.int/news-room/fact-

sheets/detail/malnutrition#:~:text=There%20are%204%20broad%20sub,deficienci es%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





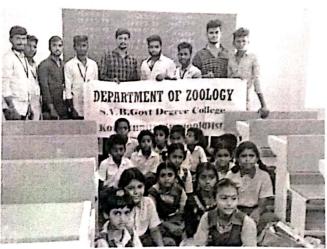












EVALUATION

Page No:

Student Self-Evaluation for the Community Service Project

Student Name: O. Asholo

Registration No: 3356041001

Period of CSP: From: To: 13-04-2021 - 12-06-2022

Date of Evaluation: 10 - 11 - 2022

Please rate your performance in the following areas:

Rating Scale:

3,22,22,22,22,22,22,23,33,55,66,66

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		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: 10-11-2022

Signature of the Student

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

Student Name: O . As hok

Registration No: 3035 904100

Period of CSP: From: To: /3-04-2022 - 12-06-2022

Date of Evaluation: $\sqrt{9 - 1/-2011}$

Name of the Person in-charge: K. Sohoil

Address with mobile number: 912141677t

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

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

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

k. Schail

Date: 10-11-2022

Signature of the Supervisor

Page No:



INTERNAL ASSESSMENT STATEMENT

Name Of the Student:

Programme of Study:

Year of Study: 2021-2023

Group: B.sc BIZIC

Register No/H.T. No: 2035804 1001

Name of the College: S. V.B Growt Degree College University: Doyalogeema University

Sl.No	Evaluation Criterion	Maximum Marks	Marks Awarded
1.	Activity Log	20	15
2.	Community Service Project Implementation	30	25
3.	Mini Project Work	25	20
4.	Oral Presentation	25	15
(a	GRAND TOTAL	100	75

Date: 22/12/2029

KLIRNOOL (DT.

H. Raw Stol Signature of the Faculty Guide

Certified by

Date: Seal:

22232222222222222222

Signature of the Head of the Department/Principal

PRINCIPAL

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

Page No: