

IMPACTS OF FAST FOOD ON HEALTH AND ITS QUALITY CONTROL

We (Ayisha Rana.K, Shahana P,Afra M)are a group of final year students of MSC STATISTICS, CALICUT UNIVERSITY collecting the data for our final year project wok regarding the "IMPACTS OF FAST FOOD ON HEALTH AND ITS QUALITY CONTROL".This is purely for the purpose of o ur project work and we assure you that your responses will not be misused.
we expect your co-operation.

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** Indicates required question*

1. What is your gender? *

Mark only one oval.

- ☐ Male
☐ Female
☐ Other

2. What is your age? *

Mark only one oval.

☐ 10-20

☐ 31-40

☐ 21-30

3. What is your height(in cm)? *

4. What is your current weight(in kg)? *

5. What is your current occupation? *

Mark only one oval.

- ☐ Student
- ☐ Working
- ☐ Unemployed
- ☐ Home maker

6. What is your household income range (monthly)? *

Mark only one oval.

- ☐ Below 15,000
- ☐ 15,000-80,000
- ☐ Above 80,000

7. Your districts? *

Mark only one oval.

- ☐ Calicut
- ☐ Malappuram
- ☐ Other

8. Your locality? *

Mark only one oval.

- ☐ Urban
- ☐ Rural
- ☐ Semi-urban

9. How often do you consume fast food? *

Mark only one oval.

- ☐ Daily
- ☐ Weekly 2 times
- ☐ Weekly 5 times
- ☐ Monthly
- ☐ Rarely

10. What time of day do you typically consume fast food? *

Tick all that apply.

- ☐ Breakfast
- ☐ Lunch
- ☐ Evening
- ☐ Dinner

11. What type of fast food do you consume the most? *

Tick all that apply.

- ☐ Burgers
- ☐ Pizza
- ☐ Fried Chicken
- ☐ Sandwiches
- ☐ Mandi
- ☐ Shawarma
- ☐ Chicken (Alfahm, Shawaya, Tandoori, etc)
- ☐ Roti (Poratta, Kubboos, Nan, etc)
- ☐ Other

12. How much do you spend per fast food meal? *

Mark only one oval.

- ☐ Less than 100
- ☐ Between 100-500
- ☐ More than 500

13. How has your fast food consumption changed over the past month? *

Mark only one oval.

- ☐ Increased
- ☐ Decreased
- ☐ Stayed the same

14. Do you usually consume beverages like soda or milkshakes with fast food? *

Mark only one oval.

- ☐ Yes
- ☐ No

15. What motivates your fast food consumption? *

Tick all that apply.

- ☐ Social Media Influence
- ☐ Brand value
- ☐ Cost
- ☐ Easily Available
- ☐ Habit
- ☐ Special Offer
- ☐ Other

16. Have you experienced any of the following health changes due to fast food consumption? *

Tick all that apply.

- ☐ Weight gain/loss
- ☐ Increased cholestrol levels
- ☐ Increased blood pressure
- ☐ Digestive issues
- ☐ No Changes

17. How would you rate your overall health? *

Mark only one oval.

☐ Excellent

☐ Good

☐ Average

☐ Poor

18. Do you monitor your nutritional value/calorie of fast food meals? *

Mark only one oval.

☐ Always

☐ Sometimes

☐ Never

19. How satisfied are you with your current fast food consumption habits? *

Mark only one oval.

☐ Very Unsatisfied

☐ Unsatisfied

☐ Neutral

☐ Satisfied

☐ Very Satisfied

20. Have you ever felt the need to control fast food consumption due to any of the following reason? *

Tick all that apply.

☐ Due to health problem

☐ Tendency to cause weight gain

☐ Parental pressure to quit

☐ Waste of money

☐ Addiction tendency