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Diet Survey and Nutritional Assessment of Jarawa

Form No. 1

General Information/ Demography/ Anthropometry

Place of Residence(Territory):

Eldest member of the Family

Family Type: Nuclear/Joint

Date of Investigation

Sl. No.	Name of the members	Age	Sex	Occupation	Marital Status	Physiological Status	ACU	Anthropometry				
								Ht. (M)	Wt. (Kg)	MUAC (Cm.)	BMI	Grade
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
9.												
10.												

Signature of the Investigator: