



**CERTIFICATE**

This is to certify that

Student Name: **MEGHA**

Register Number: **19YYS85066**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics ,6th semester**

Topic/Title: **"NUTRACEUTICAL PRODUCTS AVAILABLE IN MARKET".**

This thesis/report is being submitted to Padmashree Institute of Management and Sciences, affiliated to Bangalore University. It is an original record of the work carried out by the candidate and has not been previously submitted for the award of any other degree or diploma in any other University in India or abroad.

Date: **19/08/2022**

Place: **Bangalore**

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**Dr. Shilpa P**

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**Principal**

**Dr. Anuradha**

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**Dr. Soumya Rajashekar**



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This is to certify that

Student Name: **KAVYA C B**

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Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“NUTRACEUTICAL PRODUCTS AVAILABLE IN MARKET”.**

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Date: **19/08/2022**

Place: **Bangalore**

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Register Number: **19YYS85054**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics ,6<sup>th</sup> semester**

Topic/Title: **“NUTRACEUTICAL PRODUCTS AVAILABLE IN MARKET”**.

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This is to certify that

Student Name: **GANAVI J**

Register Number: **19YYS85057**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“NEUTRACUTICAL PRODUCTS AVAILABLE IN MARKET”.**

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Date: *19/08/2022*

Place: Bangalore

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This is to certify that

Student Name: **ROHINI**

Register Number: **19YYS85073**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“NUTRACEUTICAL PRODUCTS AVAILABLE IN MARKET”.**

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## CERTIFICATE

This is to certify that

Student Name: **FRIDA LIZ RAJ**

Register Number: **19YYS85056**

Program/Semester: **B.Sc. Clinical Nutrition and Dietetics, 6th semester**

Topic/Title: **“SURVEY TO CHECK WHETHER THE NUTRITIONAL REQUIREMENTS OF COLLEGE STUDENTS ARE BEING MET OR NOT”.**

This thesis/report is being submitted to Padmashree Institute of Management and Sciences, affiliated to Bangalore University. It is an original record of the work carried out by the candidate and has not been previously submitted for the award of any other degree or diploma in any other University in India or abroad.

Date: *19/08/2022*

Place: Bangalore

*Shilpa P*  
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This is to certify that

Student Name: **PARISMITA PATOWARY**

Register Number: **19YYS85068**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“SURVEY ON DIETARY HABITS AMONG COLLEGE STUDENTS”.**

This thesis/report is being submitted to Padmashree Institute of Management and Sciences, affiliated to Bangalore University. It is an original record of the work carried out by the candidate and has not been previously submitted for the award of any other degree or diploma in any other University in India or abroad.

Date: **19/08/2022**

Place: **Bangalore**

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This is to certify that

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Register Number: **19YYS85055**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“AN SURVEY ON NUTRITIONAL REQUIREMENT ARE MET BY COLLEGE STUDENTS”.**

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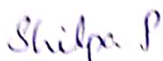
Program/Semester: **B.Sc. Clinical Nutrition and Dietetics, 6<sup>th</sup> semester**

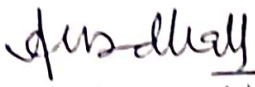
Topic/Title: **SURVEY TO CHECK WHETHER THE NUTRITIONAL REQUIREMENTS OF COLLEGE STUDENTS ARE BEING MET OR NOT**

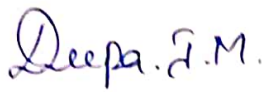
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Date: **17/08/2022**

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Student Name: **B. RAKSHITHA**

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Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“SURVEY TO CHECK WHETHER THE NUTRITIONAL REQUIREMENTS OF COLLEGE STUDENTS ARE BEING MET OR NOT”**

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Date: **19/08/2022**

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This is to certify that

Student Name: **KEERTHANA M**

Register Number: **19YYS85063**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“RB BITES FOR PAEDIATRICS AND GERIATRICS”.**

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Date: **19/06/2022**

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This is to certify that

Student Name: **KAUSTUBH SONARKAR**

Register Number: **19YYS85078**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“R B BITES FOR PAEDIATRICS AND GERIATRICS”**

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Date: *19/08/2022*

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Register Number: **19YYS85053**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“R B BITES FOR PEDIATRICS AND GERIATRICS”**.

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Date: **19/06/2022**

Place: **Bangalore**

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This is to certify that

Student Name: **BHOOMIKA M**

Register Number: **19YYS85052**

Program/Semester : **B.Sc. Clinical Nutrition & Dietetics , 6th semester**

Topic/Title: **“RB BITES FOR PAEDIATRICS AND GERIATRICS”**

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Date: *19/08/2022*

Place: Bangalore

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This is to certify that

Student Name: **HARSHITHA.M**

Register Number: **19YYS85064**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **"R.B. BITES FOR GERIATRICS AND PEDIATRICS"**

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Place: Bangalore

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This is to certify that

Student Name: AFSANA KHAN

Register Number 19YYS85045

Program/Semester: B.Sc. Clinical Nutrition and Dietetics, 6<sup>th</sup> semester

Topic/Title: NUTRITIONAL SUPPLEMENTS DURING BREAST FEEDING

This thesis/report is being submitted to Padmashree Institute of Management and Sciences, affiliated to Bangalore University. It is an original record of the work carried out by the candidate and has not been previously submitted for the award of any other degree or diploma in any other University in India or abroad.

Date: 19/08/2022

Place: Bangalore

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Student Name: **SURANJITA PAUL**

Register Number: **19YYS85080**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“NUTRITIONAL SUPPLEMENTATION DURING BREASTFEEDING”.**

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Student Name: **SNEHA RAMESH**

Register Number: **19YYS85077**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“NUTRITIONAL SUPPLEMENTS DURING BREASTFEEDING”.**

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Student Name: **ATHIRA MOL**

Register Number: **19YYS85050**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“NUTRITIONAL SUPPLEMENTATION DURING BREASTFEEDING”.**

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Date: **19/06/2022**

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This is to certify that

Student Name: **GANGA H**

Register Number: **19YYS85058**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“NUTRITIONAL SUPPLEMENTS FOR BREASTFEEDING”.**

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Date: *19/05/2022*

Place: Bangalore

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This is to certify that

Student Name: **RUCHITA DAS**

Register Number: **19YY585074**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“NUTRITIONAL SUPPLEMENTS DURING BREASTFEEDING”**

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## CERTIFICATE

This is to certify that

Student Name: **NANDHANA SURESH**

Register Number: **19YYS85067**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“FOOD PRODUCT DEVELOPMENT BY USING SEED CYCLE METHOD FOR PCOD”.**

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Place: **Bangalore**

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This is to certify that

Student Name: **RAJANI BIRADAR**

Register Number: **19YYS85072**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“FOOD PRODUCT DEVELOPMENT BY USING SEED CYCLE METHOD FOR PCOD”.**

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Date: *19/08/2022*

Place: Bangalore

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## CERTIFICATE

This is to certify that

Student Name: MAHALAKSHMI A

Register Number: 19YYS85065

Program/Semester: B.Sc. Clinical Nutrition & Dietetics, 6th semester

Topic/Title: "FOOD PRODUCT DEVELOPMENT BY USING SEED CYCLE METHOD FOR PCOD".

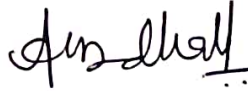
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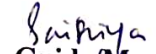
  
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## CERTIFICATE

This is to certify that

Student Name: SREEPRASAD PS

Register Number: 19YYS85079

Program/Semester: B.Sc. Clinical Nutrition & Dietetics, 6th semester

Topic/Title: "FOOD PRODUCT DEVELOPMENT BY USING SEED CYCLE METHOD FOR PCOD".

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Date: 19/08/2022

Place: Bangalore

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This is to certify that

Student Name: **SWATHI SM**

Register Number: **19YYS85081**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“FOOD PRODUCT DEVELOPMENT BY USING SEED CYCLE METHOD FOR PCOD”.**

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Date: **19/08/2022**

Place: **Bangalore**

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This is to certify that

Student Name: **ALEENA GURRALA**

Register Number: **19YYS85047**

Program/ Semester: **B.Sc. Clinical Nutrition & Dietetics, 6<sup>th</sup> semester**

Topic/Title: **FOOD PRODUCT DEVELOPMENT BY USING SEED CYCLING METHOD FOR PCOD**

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Date: **19/08/2022**

Place: Bangalore

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Student Name: PAVITHRA M

Register Number: 19YYS85070

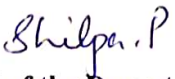
Program/Semester: B.Sc. Clinical Nutrition & Dietetics, 6th semester

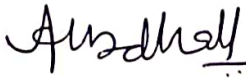
Topic/Title: "FOOD PRODUCT DEVELOPMENT BY USING SEED CYCLING METHOD FOR PCOD".

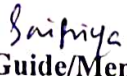
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Date: 19/08/2022

Place: Bangalore

  
Head of the Department  
Dr. Shilpa P

  
Principal  
Dr. Anuradha

  
Guide/Mentor  
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## CERTIFICATE

This is to certify that

Student Name: **SHAIK KARISHMA**

Register Number: **19YYS85075**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“SURVEY ON IRON DEFICIENCY IN ADOLESCENT GIRLS”.**

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## CERTIFICATE

This is to certify that

Student Name: **SINGAM PALLAVI JYOTHSNA**

Register Number: **19YYS85076**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“IRON DEFICIENCY ANEMIA IN ADOLESCENT GIRLS”**

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This is to certify that

Student Name: VALMIKAM SRI LASYA

Register Number: 19YYS85085

Program/Semester: B.Sc. Clinical Nutrition & Dietetics, 6th semester

Topic/Title: "SURVEY ON DIETARY AND SLEEP HABITS OF IT EMPLOYEES".

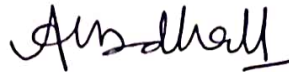
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Student Name: **PUJARI HARSHA MADHAVI**

Register Number: **19YYS85071**

Program/Semester **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“SURVEY ON IRON DEFICIENCY IN ADOLESCENT GIRLS”.**

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This is to certify that

Student Name: **KAVYA K SAJI**

Register Number: **19YYS85062**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“SURVEY ON IRON DEFICIENCY ANAEMIA IN ADOLESCENTS”.**

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This is to certify that

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Register Number: 19YYS85083

Program/Semester: B.Sc. Clinical Nutrition & Dietetics, 6th semester

Topic/Title: "SURVEY ON DIETARY AND SLEEP HABITS OF IT EMPLOYEES".

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This is to certify that

Student Name: TWINCY ANN SUNIL

Register Number: 19YYS85084

Program/Semester: B.Sc. Clinical Nutrition & Dietetics, 6th semester

Topic/Title: "SURVEY ON DIETARY & SLEEP HABITS OF IT PROFESSIONALS".

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Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“SURVEY ON DIETARY & SLEEP HABITS OF IT PROFESSIONALS”.**

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Register Number: 19YYS85049


Program/Semester: B.Sc. Clinical Nutrition & Dietetics, 6<sup>th</sup> semester

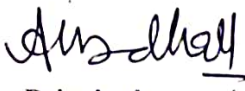
Topic/Title: "SURVEY ON IRON DEFICIENCY ANAEMIA IN ADOLESCENTS"


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Register Number: **19YYS85048**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **SURVEY ON DIETARY & SLEEP HABITS OF IT PROFESSIONALS**

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*Anuradha*  
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This is to certify that

Student Name: **V.RUCHITHA**

Register Number: **19YYS85087**

Program/Semester: **B.Sc. Clinical Nutrition & Dietetics, 6th semester**

Topic/Title: **“SURVEY ON IRON DEFICIENCY IN ADOLESCENT GIRLS”.**

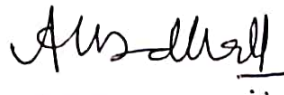
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Register Number: 19YYS85069

Program/Semester: B.Sc. Clinical Nutrition & Dietetics, 6th semester

Topic/Title: "NUTRACEUTICAL PRODUCTS AVAILABLE IN THE MARKET".

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