

Sheboygan County 4-H
Project Record Form for _____ (year)

Name: _____ Grade: _____

Project Name: _____

Number of Years in this Project: _____

Number of project meetings held: _____ club/county

Number of project meetings attended: _____ club/county

Who is your primary leader for this project? _____

1. What is your goal(s) in this project?

Goal # 1: _____

Did you accomplish your goal? Yes No

Goal #2: _____

Did you accomplish your goal? Yes No

2. What did you learn in this project?

3. What did you like most about this project?

4. What would you do differently in this project?

5. Would you recommend this project to another 4-H member? Yes No

Why? _____

INDIVIDUAL EXHIBIT LISTING

Item	Time Spent	Cost	Worth	Exhibited Yes/ No	Where	Placing

PROJECT PARTICIPATION



*Required for 4-H Special Interest (SPIN) Members

Activity Date	Activity Description	Time Spent

Total _____

(Optional) Pictures/or sketches of project work. (Add pages if necessary)

Parent and/or leader comments:
