

4-H Project Record Sheet Example

All 4-H project members are required to keep records of their project work as part of their learning experience. This record sheet example may be used as is if there is a limited amount of information and records to keep. However, if you have more inventory, or items purchased, or activities/events, etc. to record than there is room on this example form, then you may have to create your own record form on your computer or on notebook paper to provide room for all the information you need to record. Be sure to include all 13 of these record items in your records and simply write NA or NONE in that space if it does not apply or you have nothing to record.

4-H Member's Name: _____ Age: _____

Project Name: _____ Years in Project: _____

4-H Club Name: _____

1. What would you like to learn from this project this year? _____

2. What activities can I participate in to help me learn? _____

3. What books or magazines can I read to help me learn? _____

4. Animals and/or materials, supplies and equipment I will need for this project?

A. What animals, supplies, equipment and materials do I already have:

Inventory	Value	Inventory	Value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

B. What will I need to purchase, or borrow, or make?

Item Name	Cost	Item Name	Cost
_____	_____	_____	_____
_____	_____	_____	_____



5. How much time do I think it will take from me to complete this project?

Number of Days	Hours/Minutes per Day	Total Hours
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6. Animals, equipment, materials, supplies purchased:

Purchase Date	Item	Cost
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Items made or completed:

Completed Date	Item	Cost
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

8. Participation in educational activities relating to this project. Demonstrations, fair exhibits, clinics, tours, etc.

Date	Activity/Recognition	Award Receiver
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. Time spent on this project:

Number of Days	Hours/Minutes per Day	Total Hours
_____	_____	_____

10. List things you learned while doing this project.

11. List things you would do differently if you could do this project again.

12. Closing inventory – what equipment, materials, supplies, animals do I have on hand?

Item	Value
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

13. Products, equipment or materials sold (if applicable).

Date	Number/Weight	Price/Per
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
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