

**UConn 4-H RECORD KEEPING**

**NON ANIMAL PROJECTS**

Use a different Record Sheet for each 4-H Project

Name 4-H Program Year



Age

Project Years enrolled in this project, including this year

# PROJECT GOAL

Describe your project in a few sentences.

In the beginning of the year

What would you like to learn or achieve about your project this year?

During the year, I will meet this goal by: (Check as many as you plan to do)

\_\_\_

\_\_\_

\_

\_ Attending 4-H meetings Attending workshops

\_\_\_

\_\_\_

\_ Talking to industry experts \_ Practicing Researching the topic

At the end of the year

\_\_\_

Did you reach your goal? Ye N Partiall \_

s\_\_\_

o\_\_\_

y\_\_\_

If you did not reach your goal or partially reached your goal, what happened?

***PROJECT ACTIVITIES*** List project meetings, judging activities, clinics, exhibits, workshops, tours, conferences, shows, exhibiting/volunteering at the 4-H Fair or participating at Eastern States, etc. that you did in your project this year. Include non 4-H events/activities that relate to your project. **Please note in the Activity column if it was a 4-H or non 4-H activity/event**.

|  |  |  |  |
| --- | --- | --- | --- |
| ***Date*** | ***Activity*** | ***What did you do?*** | ***What did you learn?*** |
|  |  |  |  |
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***HOW MUCH TIME DO YOU SPEND ON YOUR PROJECT?*** *Record the amount of time you spend with your project during the year. Use a calendar to record time you spend on your project each day. Then record the monthly totals onto this chart.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | ***What did you do?*** | ***Total Time/ Per Month*** | ***Comments*** |
| ***Oct.*** |  |  |  |
| ***Nov.*** |  |  |  |
| ***Dec.*** |  |  |  |
| ***Jan.*** |  |  |  |
| ***Feb.*** |  |  |  |
| ***Mar.*** |  |  |  |
| ***Apr.*** |  |  |  |
| ***May*** |  |  |  |
| ***Jun.*** |  |  |  |
| ***Jul.*** |  |  |  |
| ***Aug.*** |  |  |  |
| ***Sep.*** |  |  |  |
|  | ***Total hours*** |  |  |

# FINANCIAL INFORMATION

*Did you spend any money in this project? If yes, list a few of your purchases and their cost. If nothing was purchased, write NA.*

|  |  |
| --- | --- |
| ***Item*** | ***Amount*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| ***Total*** |  |

*Did you make any money in this project? If yes, complete the chart below. If no, write NA.*

|  |  |
| --- | --- |
| ***How I Earned Money*** | ***Amount*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| ***Total*** |  |

**Financial Review**

|  |  |  |
| --- | --- | --- |
| ***I Spent This Amount of Money*** | ***I Earned This Amount of Money*** | ***The Difference Between What I Spent and What I Earned Is*** |
| ***$*** | ***$*** | ***$*** |

Would you do anything differently? (Remember the total expenses and income get included in your yearly record sheet.)

YEARLY REVIEW

List new skills you learned this year.

What challenges did you encounter in your project? How did you resolve them?

How will you use what you learned?

List 2 safety practices that you followed in this project.

# Attach one or two selected photographs or news articles. (optional)

Equal opportunity employer and program provider

Updated 1/19