



CONNECTICUT 4-H RECORD KEEPING



ALTERNATE PROJECT RECORD - ANIMAL PROJECTS

Available for 7 or 8 year olds or youth with special needs.

Use a different Record Sheet for each 4-H Project

Name _____ 4-H Program Year _____ Age _____

Animal Project _____ Years enrolled in this project, including this year _____

PROJECT GOAL

In the beginning of the year

What would you like to learn about your animal this year?

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

___ Attending 4-H meetings ___ Talking to "experts" ___ Attending workshops
___ Practicing ___ Researching the topic

At the end of the year

Did you reach your goal? Yes___ No___ Partially___

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

DESCRIBE YOUR PROJECT In the boxes on the left write or have an adult write about your four favorite 4-H project activities that you participated in this year. In the right hand boxes draw or attach pictures to show the activities.

Project Activity Description	Project Activity Picture

ANIMAL IDENTIFICATION

What is your animal's name? _____

When was it born? _____ What is its sex? _____

Is your animal registered? _____ If yes, Include a copy of your animal's registration papers.

What is its height? _____ What is its weight? _____

What does your animal look like? _____

Draw or attach a picture of your animal here.

EQUIPMENT & SUPPLIES List equipment or supplies you have for your animal. (brushes, buckets, etc.)

CARE OF YOUR ANIMAL- HEALTH AND VETERINARY RECORD

Your animal depends on you for its basic needs. That means your animal requires regular care. What kind of shots or vaccinations, illnesses, accidents or other things has your animal had this year? Have you trimmed its hair or fur, nails or feet? Do you brush its teeth? List all that information here. Add more sheets if necessary.

Date	Treatment Given	Cost
	Total	

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.

	Training Handling	Housing Care	Grooming	Showing				Total Time/ Per Month	Comments
Oct.									
Nov.									
Dec.									
Jan.									
Feb.									
Mar.									
Apr.									
May									
Jun.									
Jul.									
Aug.									
Sep.									
Total hours									

HOUSING INFORMATION

1. What type of shelter does your animal have? _____
2. Does your animal use bedding? _____
3. What type of bedding? _____
4. How much do you use per week? _____
5. What is the unit cost of your bedding? _____
6. Draw or paste a picture of its shelter here.

YEARLY REVIEW

What have you learned about your animal this year?

What advice would you give a person doing this project?

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