

# Lewis County 4-H Project Completion Award Application

***This award may be granted to any (8-19 year old) 4-H member. The member must complete the work within the current 4-H year (October 1-September 30).***

Name \_\_\_\_\_

Age \_\_\_\_\_

4-H Club Name (or Independent if no club) \_\_\_\_\_

## REQUIRED

Select from  
dropdown menu

Selected and participated in a project	
Completed a project completion form or record book	
Informed the 4-H leader of all projects you have participated in	
Given a demonstration, talk or prepared an exhibit on a project	

## OPTIONAL

Select from  
dropdown menu

Brought a parent to 50% of regular club meetings	
Served on a committee or as an elected officer	
Took a friend to a 4-H meeting or event	
Participated in a community service project	
Participated in a 4-H activity (Achievement Day, Public Pres., Dairy Discover, Career Ex.)	
Participated in a county workshop (Such as showmanship, Tractor Safety, etc.)	
Participated in a leadership event (for example Jr. Superintendent)	

4-H Member Signature \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Club Leader's Signature \_\_\_\_\_  
(leave blank if independent)

**\*Please complete just **one application** and staple all project record sheets for that member to it.**

*Project record sheets must be completed and submitted to the County Extension office by **Friday, September 26 by 4:00 pm**. Project record sheets **are for each project**, not for each activity or event. It is necessary to have a form on file for consideration of a certificate at the awards ceremony.*

# Project Record Sheet

## Project Area:

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Cornell University  
Cooperative Extension  
Lewis County

**Deadline:** All 4-H members are required to turn in at least one project record per year by September 30.  
(If applying for awards for Achievement Night please turn in by deadline on the award application.)

Member Name: \_\_\_\_\_ Age (as of Jan. 1): \_\_\_\_\_  
Club name or Independent if no club \_\_\_\_\_ Years in project area: \_\_\_\_\_

**MY GOALS:** Write your goals for your project. Remember a good goal tells three things:

1. Action – how you will do something (I will learn, I will improve, I will teach, I will increase...)
2. Results – what you are going to do (to work with watercolors, to groom my animal, how it works)
3. Timetable – when you are going to do it (within the 4H program year, in the next 6 months...)

**ACTIVITIES & EVENTS:** List all that relate to this project. These can include county or state 4-H programs.

Activities could include: – went on a hike to take photos, used miter box to make angled trim, visited an art museum, etc.

Events include: workshops, educational tours, contests, quiz bowls, competitions, shows, certification courses, trips and conferences.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**DEMONSTRATE OR EXHIBIT:** How did you show off your new skills that you learned?

Examples could include: participated in a contest, livestock show, presented to an audience, demonstrated at a club project meeting, gave a speech, exhibited at the fair, etc.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

## RECOGNITION RECEIVED

Examples could include: club part for reaching your goal, congratulations from leader, awards, ribbons, certificates, etc.

1. \_\_\_\_\_

2. \_\_\_\_\_

What **RESOURCES** did you use to learn more about your project area? (Club Leader, other 4-Her, website, book, article, 4-H curriculum, hands-on activity, etc.)

1. \_\_\_\_\_ 4. \_\_\_\_\_

2. \_\_\_\_\_ 5. \_\_\_\_\_

3. \_\_\_\_\_ 6. \_\_\_\_\_

**LIFE SKILLS** learned during this project (Circle all that apply):

This is your space to DESCRIBE your project:

(what was fun, challenging, favorite part, or anything else you want to share).

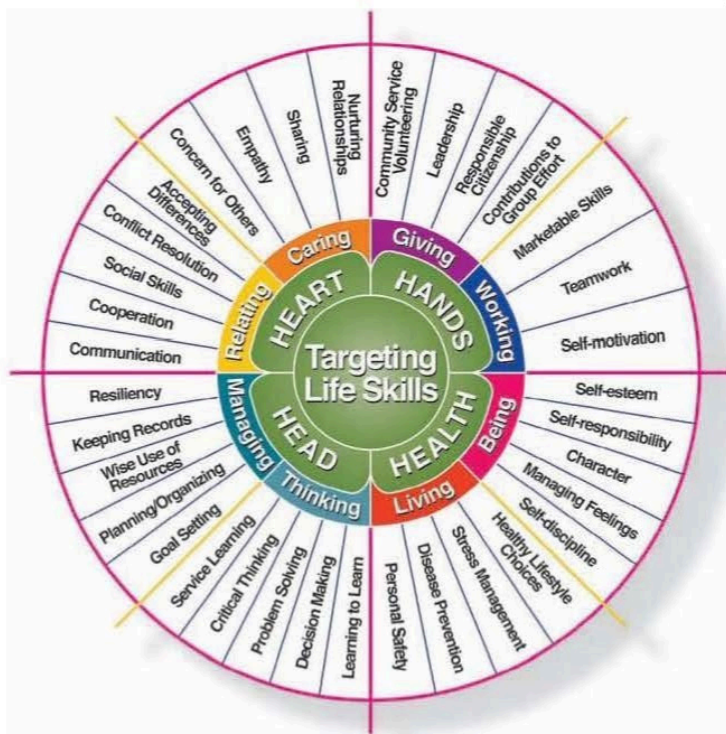


Fig. 1. Targeting Life Skills model. Source: Hendricks 1996.

Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To the best of my knowledge the above work was completed by this member for his/her 4-H project.

Club Leader's Signature (leave blank if independent): \_\_\_\_\_ Date: \_\_\_\_\_

Leaders: please initial in the Targeting Life Skills model above the skills you observed the member to develop in this project. These may be the same or different than the skills identified by the youth member. We appreciate your comments about youth skill development through this project.