



Lewis County 4-H Cloverbud Award Application This award may be granted to any 5-7 year old Cloverbud member

Name		Age
4-H Club (or Independ	dent)	
Have you completed Select from drop down	the following requirements for the 4-H Clov	erbud Award?
Part	ticipated in exploratory 4-H activities	
Turr	ned in a Cloverbud project record sheet with this	s application
Has	informed a 4-H leader on a project/activity you	participated in
Has	given a demonstration, talk, or prepared an exl	hibit on a project/activity
-	se tell us about your year in 4-H. Wand why? (Use the back if more room is	•
4-H Member's Sig	gnature	
Parent's Signature	e	
Club Leader's Sig	nature	
Due to the	4-H Office by Friday, September 26th, no	later than 4:00 pm.



Lewis County 4-H

Cornell Cooperative Extension Lewis County 7395 East Road, Lowville, NY 13367 (315) 376-5270

4-H Youth Development Project Record Cloverbud Ages 5-7

If you have done more than one project, please use an additional form.

Name: Age			Age (as of	Jan. 1)	
Club Name (or Independent):			Years in 4-H:		
Project Title:			Years in Project:		
Put a check next to a	at least one skill learne	d in the follow	ring categories:		
HEART		HANDS			
Make new friends			Teamwork		
Share			Help		
Care			Make Good Choices		
Cooperation			Be a leader		
HEAD		I	HEALTH		
Prepare			Feel good about myself		
Keep a journal	Keep a journal Enjoy my project				
Think	Be safe				
Problem Solving Take care of mys		elf			
How do you feel after	finishing your project	?(check one)			
Awful	Not very good	Good	Really good	Brilliant	

Explain what you did for your project.
Did you have fun? Do you think other people would like to do this project?