



Program Year: _____ 4-H Club: _____

Junior (Age 9-10) Intermediate (Age 11-13) Senior (Age 14-19)

Member's Name: _____ Award: _____

Age: (as of January 1st) _____ Email: _____

Club Level Evaluation only County Level Evaluation

This application is an honest reflection of my work.

4-H Member signature

Date

I have personally reviewed this report and believe it to be correct.

Parent/Guardian Print Name

Parent/Guardian Signature

Date

I have personally reviewed this report and believe it to be correct.

Club Leader Print Name

Club Leader Signature

Date

- This book has met the minimum requirement for participation in Incentives and Recognition.
- This book meets the requirements for competition at the county level.
- I want my book to stay at club evaluation level competition.
- I want my book to be sent to county evaluation competition.

Evaluators/Adult Partners Print Name

Evaluators/Adult Partners Signature

Date