#### be Mem **My 4-H Experiences & Accomplishments**

F6 F7 F8 F9 F10 F11 F12

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Ctrj

Name: \_\_\_\_

Rutgers

New Jersey Agricultural Experiment Station

Grade: \_\_\_\_\_ County: \_\_\_\_\_



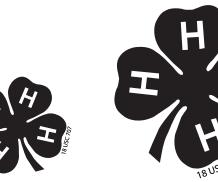
# **4-H Member Record Book**

#### A Message to 4-H'ers:

- Record-keeping is an important part of every 4-H educational project.
- Many awards, educational trips and college scholarships are given to club members on the basis of their records and project work.
- Records show your 4-H club work progress. Keep this book from year to year and add to it. You may include up to three years' of 4-H work.
- A 4-H portfolio is designed to help you keep your records and other supporting materials in an orderly manner for each of your project areas.
- Do not alter the basic format of this book, but you can add additional pages to a section if more space is needed.

#### Your 4-H Portfolio should contain the following sections:

- Section 1 Member Record Book Cover
- Section 2 4-H Member Summary
- Section 3 My 4-H Story
- Section 4 4-H Project Record
  - Include a Project Record for each project area you participate in:
    - Horse/Pony/VSE
    - Livestock
    - > Dog
    - Rabbit, Small Animal & Herpetology
    - General (ex: Community Service, Woodworking, Small Engines)
- Section 5 Photos & Supporting Materials









| This record belongs to | 0:Name                            |                   |               |  |  |  |
|------------------------|-----------------------------------|-------------------|---------------|--|--|--|
|                        | Year                              |                   |               |  |  |  |
| Mailing Address:       | Mailing Address:                  |                   |               |  |  |  |
|                        | Street                            |                   | Apt. #        |  |  |  |
|                        | City/Town                         | State             | Zip           |  |  |  |
| Please indicate age as | of January 1st:                   |                   |               |  |  |  |
| 0                      | pleting: Please check J           | unior (grade 4-8) | Senior (9-13) |  |  |  |
| 4-H Club(s):           |                                   |                   |               |  |  |  |
| My 4-H goals for this  | year:                             |                   |               |  |  |  |
| My 4-H projects this y | year; number of years in project: |                   |               |  |  |  |
| Name of Project        | # of Years                        | Name of Project   | # of Years    |  |  |  |
|                        |                                   |                   |               |  |  |  |

| Name of Project | # of Years | Name of Project | # of Years |
|-----------------|------------|-----------------|------------|
|                 |            |                 |            |
|                 |            |                 |            |
|                 |            |                 |            |
|                 |            |                 |            |
|                 |            |                 |            |

| YEAR END SIGNATURES:                     |               |                                    |      |
|------------------------------------------|---------------|------------------------------------|------|
| I have completed this record and believe | e all informa | ation to be complete and accurate. |      |
|                                          |               |                                    |      |
|                                          |               |                                    |      |
| Member's Signature                       | Date          | Parent/Guardian's Signature        | Date |
|                                          |               |                                    |      |
|                                          |               |                                    |      |
| Leader's Signature                       | Date          | 4-H Faculty/Staff Signature        | Date |
|                                          |               |                                    |      |

| Club Participation<br>Number of Meetings I Attended (Check or make notes) |     |     |     |     |     |     |     |     |     |     |     |     |
|---------------------------------------------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Club Name                                                                 | JAN | FEB | MAR | APR | MAY | JUN | JUL | AUG | SEP | OCT | NOV | DEC |
|                                                                           |     |     |     |     |     |     |     |     |     |     |     |     |
|                                                                           |     |     |     |     |     |     |     |     |     |     |     |     |

| Committees & Offices (4-H, school etc.)              |  |  |  |  |
|------------------------------------------------------|--|--|--|--|
| Name of Committee/Office/Role Description/What I Did |  |  |  |  |
|                                                      |  |  |  |  |
|                                                      |  |  |  |  |
|                                                      |  |  |  |  |
|                                                      |  |  |  |  |
|                                                      |  |  |  |  |
|                                                      |  |  |  |  |
|                                                      |  |  |  |  |

|                  | 4-H Promotion Act                            | ivities                                   |
|------------------|----------------------------------------------|-------------------------------------------|
| I promoted or pu | blicized 4-H in these ways during the year   | (news articles, TV, radio, 4-H Ambassador |
| Responsibiliti   | es, displays, fair booths, flyers, new membe | er recruitment, and expansion efforts):   |
| Date             | Activity                                     | Results                                   |
|                  | Be Specific – Explain Activity & Location    |                                           |
|                  |                                              |                                           |
|                  |                                              |                                           |
|                  |                                              |                                           |
|                  |                                              |                                           |
|                  |                                              |                                           |
|                  |                                              |                                           |
|                  |                                              |                                           |
|                  |                                              |                                           |

|      | Communi                                                                                                          | cation Activities |  |  |  |  |  |
|------|------------------------------------------------------------------------------------------------------------------|-------------------|--|--|--|--|--|
|      | I took part in the following communication activities<br>(speeches, demonstrations, visual presentations, etc.): |                   |  |  |  |  |  |
| Date | Type of Communication Title Event or Location                                                                    |                   |  |  |  |  |  |
|      |                                                                                                                  |                   |  |  |  |  |  |
|      |                                                                                                                  |                   |  |  |  |  |  |
|      |                                                                                                                  |                   |  |  |  |  |  |
|      |                                                                                                                  |                   |  |  |  |  |  |
|      |                                                                                                                  |                   |  |  |  |  |  |
|      |                                                                                                                  |                   |  |  |  |  |  |
|      |                                                                                                                  |                   |  |  |  |  |  |

|      | Awards and Honors                              |       |          |  |  |  |  |  |
|------|------------------------------------------------|-------|----------|--|--|--|--|--|
|      | ude 4-H awards and honors such as fair and cou |       |          |  |  |  |  |  |
| Date | Activity/Event                                 | Award | Location |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |
|      |                                                |       |          |  |  |  |  |  |

|                                                                       | Journal of Activities, Events, and Experiences                                                                                                                                                              |  |          |  |  |  |  |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------|--|--|--|--|
|                                                                       | Use this page to record <b>all</b> activities, events, and experience as you have them. Include 4-H, volunteer, community, citizenship, leadership, service learning, school, sports, and other activities. |  |          |  |  |  |  |
| Date   4-H Event   Type of Activity or Event   Location   Description |                                                                                                                                                                                                             |  |          |  |  |  |  |
|                                                                       |                                                                                                                                                                                                             |  |          |  |  |  |  |
|                                                                       |                                                                                                                                                                                                             |  |          |  |  |  |  |
|                                                                       |                                                                                                                                                                                                             |  |          |  |  |  |  |
|                                                                       |                                                                                                                                                                                                             |  |          |  |  |  |  |
|                                                                       |                                                                                                                                                                                                             |  |          |  |  |  |  |
|                                                                       |                                                                                                                                                                                                             |  |          |  |  |  |  |
|                                                                       |                                                                                                                                                                                                             |  |          |  |  |  |  |
|                                                                       |                                                                                                                                                                                                             |  |          |  |  |  |  |
|                                                                       |                                                                                                                                                                                                             |  | <u> </u> |  |  |  |  |

#### My 4-H Story

(Add additional pages as needed)

Acknowledgments: Modified from the University of Maryland 4-H State Office 4-H Summary Record - 2017

Cooperating Agencies: Rutgers, The State University of New Jersey, U.S. Department of Agriculture, and Boards of County Commissioners. Rutgers Cooperative Extension, a unit of the Rutgers New Jersey Agricultural Experiment Station, is an equal opportunity program provider and employer.





### **Gloucester County 4-H Dog Project Record**

| Name         |      | 4-H Age               |  |
|--------------|------|-----------------------|--|
| Primary Club | Name |                       |  |
| Years in 4-H |      | Years in this Project |  |

What goals did you set for your project this year and did you achieve them?

| 1. |  |  |  |
|----|--|--|--|
|    |  |  |  |
| 2. |  |  |  |
|    |  |  |  |
| 3. |  |  |  |
|    |  |  |  |

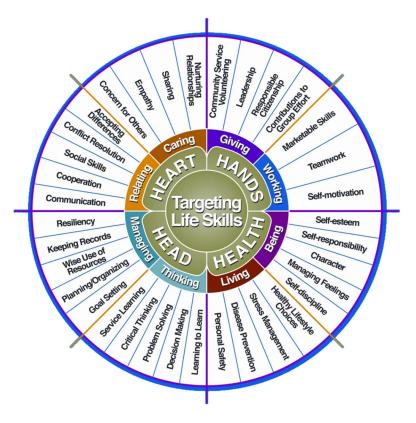
| What were four things you learned from completing this project this year? |
|---------------------------------------------------------------------------|
| 1.                                                                        |
|                                                                           |
| 2.                                                                        |
|                                                                           |
| 3.                                                                        |
|                                                                           |
| 4.                                                                        |
|                                                                           |

What is one thing you would like to improve or do differently with your project next year?

|                                                                                    | LIFE SKILLS                                                                                                                                  |  |  |  |  |  |
|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| Describe the Life Skills                                                           | you used and what you learned in relation to your project.                                                                                   |  |  |  |  |  |
| I used one or more of these Life<br>Skills from the Targeting Life<br>Skills Wheel | What I learned as a result of using this skill.                                                                                              |  |  |  |  |  |
| <b>HEAD</b><br>Example: Decision Making                                            | I learned that I needed to be sure to budget my money when purchasing my rabbit projects so I would have enough to cover all of my expenses. |  |  |  |  |  |
| <b>HEART</b><br>Example: Sharing                                                   | <i>I learned how to give younger 4-H members pointers on how to fit and show their animals properly.</i>                                     |  |  |  |  |  |
| HAND<br>Example: Community Service<br>Volunteering                                 | I took my lambs to the elementary schools "Ag Day" and I was able to teach<br>and expose 100 students about my lamb project.                 |  |  |  |  |  |
| <b>HEALTH</b><br>Example: Managing Feelings                                        | I learned to control my feelings when I became frustrated that my pig would<br>not cooperate to get loaded on the trailer.                   |  |  |  |  |  |

| I used one or more of these Life Skills<br>from the Targeting Life Skills Wheel | What I learned as a result of using this skill. |
|---------------------------------------------------------------------------------|-------------------------------------------------|
| HEAD                                                                            | 1.                                              |
|                                                                                 | 2.                                              |
| HEART                                                                           | 1.                                              |
|                                                                                 | 2.                                              |
| HAND                                                                            | 1.                                              |
|                                                                                 | 2.                                              |
| HEALTH                                                                          | 1.                                              |
|                                                                                 | 2.                                              |

The diagram below shows many of the Life Skills learned in 4-H:



Courtesy of Iowa State University

| Project Activities<br>Include: Field Trips, Skillathon, Judging, Workshops, Quality Assurance, Class Participation, etc.<br>All project activities listed should be about this project area only. |                        |                                                                       |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------------------------------------------------------|--|--|--|--|
| Date                                                                                                                                                                                              | Name of Activity/Event | Location<br>(School, Club, County, Regional,<br>State, National etc.) |  |  |  |  |
|                                                                                                                                                                                                   |                        |                                                                       |  |  |  |  |
|                                                                                                                                                                                                   |                        |                                                                       |  |  |  |  |

| Project Communications<br>All project communications listed should be about this project area only. |                                                                                |       |                                                                       |  |  |  |
|-----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-------|-----------------------------------------------------------------------|--|--|--|
| Date                                                                                                | Type of Communication<br>(Speech, Demonstration,<br>Visual Presentation, etc.) | Title | Location<br>(School, Club, County,<br>Regional, State, National etc.) |  |  |  |
|                                                                                                     |                                                                                |       |                                                                       |  |  |  |
|                                                                                                     |                                                                                |       |                                                                       |  |  |  |

|      | Project Exhibits<br>Include: Fairs, Shows, Community Events, etc.<br>All project exhibits listed should be for projects in this area only. |               |                |                            |  |  |  |
|------|--------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------|----------------------------|--|--|--|
| Date | Animal's Name<br>(If Applicable)                                                                                                           | Exhibit/Class | Event/Activity | Placing<br>(if applicable) |  |  |  |
|      |                                                                                                                                            |               |                |                            |  |  |  |
|      | +                                                                                                                                          |               | +              |                            |  |  |  |
|      |                                                                                                                                            |               |                |                            |  |  |  |
|      | <u> </u>                                                                                                                                   |               |                |                            |  |  |  |
|      |                                                                                                                                            |               |                |                            |  |  |  |

| Table 1: Dog Information |          |          |                  |                          |       |                     |
|--------------------------|----------|----------|------------------|--------------------------|-------|---------------------|
| Animal Name              | Breed    | Sex      | Date of<br>Birth | Spayed<br>or<br>Neutered | Color | Color<br>of<br>Eyes |
|                          | <u> </u> | <u> </u> | <br>             |                          |       |                     |
|                          |          | <u> </u> | <br>             |                          |       |                     |
|                          |          |          |                  |                          |       |                     |
|                          |          |          |                  |                          |       |                     |
|                          |          |          |                  |                          |       |                     |

| Table 2: Breeding Information   (If applicable) |           |                    |                |                  |              |
|-------------------------------------------------|-----------|--------------------|----------------|------------------|--------------|
| Animal Name                                     | Date Bred | Date Gave<br>Birth | Number<br>Born | Number<br>Weaned | Name of Sire |
|                                                 |           |                    |                |                  |              |
|                                                 |           |                    |                |                  |              |
|                                                 |           |                    |                |                  |              |
|                                                 |           |                    |                |                  |              |
|                                                 |           |                    |                |                  |              |

|       | Table 3: Feed Expenses | ,                |                                       |
|-------|------------------------|------------------|---------------------------------------|
| Month | Type of Feed           | Quantity         | Cost                                  |
|       |                        |                  | ·                                     |
|       |                        |                  | 1                                     |
|       |                        |                  | 1                                     |
|       |                        |                  | · · · · · · · · · · · · · · · · · · · |
|       |                        |                  | ·                                     |
|       | 1                      |                  | i                                     |
|       | 1                      |                  | ·                                     |
|       | 1                      | 1                |                                       |
|       | 1                      |                  |                                       |
|       | 1                      | †                |                                       |
|       | 1                      | 1                | ,                                     |
|       | +                      |                  |                                       |
|       |                        | Total Feed Costs |                                       |

|      | Table 4: Health and Veterinary Record and Expenses<br>Record routine and emergency veterinary visits. Even if you are not directly<br>responsible for these expenses, you must still complete these sections. |                         |                               |      |  |  |  |
|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------------|------|--|--|--|
| Date | Animal's Name                                                                                                                                                                                                 | Reason For Treatment or | Treatment                     | Cost |  |  |  |
|      |                                                                                                                                                                                                               | Veterinary Visit        |                               |      |  |  |  |
|      |                                                                                                                                                                                                               |                         |                               |      |  |  |  |
|      |                                                                                                                                                                                                               |                         |                               |      |  |  |  |
|      |                                                                                                                                                                                                               |                         |                               |      |  |  |  |
|      |                                                                                                                                                                                                               |                         |                               |      |  |  |  |
|      | 1                                                                                                                                                                                                             |                         |                               |      |  |  |  |
|      | 1                                                                                                                                                                                                             |                         |                               |      |  |  |  |
|      | ļ!                                                                                                                                                                                                            |                         |                               |      |  |  |  |
|      | 1                                                                                                                                                                                                             |                         |                               |      |  |  |  |
|      | 1                                                                                                                                                                                                             |                         |                               |      |  |  |  |
|      |                                                                                                                                                                                                               |                         | <b>Total Veterinary Costs</b> | \$   |  |  |  |

|      | Table 5: All Other Expenses Record<br>(Includes: Supplies, Equipment, Training, Treats, etc.) |    |  |  |  |
|------|-----------------------------------------------------------------------------------------------|----|--|--|--|
| Date |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      |                                                                                               |    |  |  |  |
|      | Total Other Expenses                                                                          | \$ |  |  |  |

| (Inclu | Table 6: All Income     de income from project animals include sale of animals/offsp | oring) |
|--------|--------------------------------------------------------------------------------------|--------|
| Date   | Income Explanation                                                                   | Amount |
|        |                                                                                      |        |
|        |                                                                                      |        |
|        |                                                                                      |        |
|        |                                                                                      |        |
|        |                                                                                      |        |
|        |                                                                                      |        |
|        |                                                                                      |        |
|        |                                                                                      |        |
|        | Total Income \$                                                                      |        |

#### Financial Summary: Please make sure to use the above totals.

Determine how much money you made or lost on your project animals. You can determine your profit (or loss) by:

| А.     |       | l <b>d Income</b><br>All Income (Table 6) |                              | \$ |
|--------|-------|-------------------------------------------|------------------------------|----|
|        |       |                                           | Total Income (A)             | \$ |
| B.     | Ad    | d Expenses                                |                              |    |
|        | 1.    | Feed Expenses (Table 3)                   |                              | \$ |
|        | 2.    | Health and Veterinary Expenses (Table     | 4)                           | \$ |
|        | 3.    | All Other Expenses (Table 5)              |                              | \$ |
|        |       |                                           |                              |    |
|        |       |                                           |                              |    |
|        |       |                                           | Total Expenses (B)           | \$ |
|        |       |                                           |                              |    |
| Subtra | act B | from A to get profit or loss              | Grand Total (profit or loss) | \$ |

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