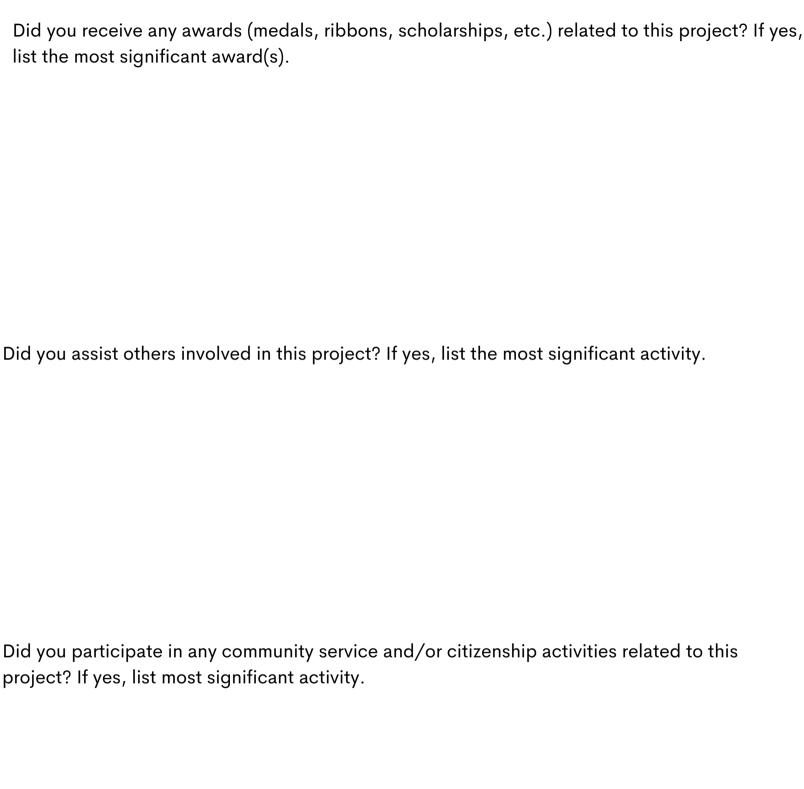
(A member may submit as many project completion forms as projects they have completed in the 22-23 year.)

WISE COUNTY 4-H PROJECT COMPLETION FORM

Name:						
Name of	Project:					
4-H Age	Division:					
Date of I	Birth:					
4-H Clul	b:					
What did you want to learn and/or accomplish in this project, this year?						
<u>Project Goals</u> 1.						
2.						
3.						
4.						
5.						
Did you participate in any of the following activities related to your project(s)?						
(Clinics	Workshops	Talks			
E	Exhibits	Project Meetings	Judging			
T	ours	Demonstrations	Other			







	raph explaining what your pr r interesting experiences, go			you liked
,	gp	,		
_				
	4-H Member Signature		Date	
_	Demont Cinnets		D-4-	
	Parent Signature		Date	