

4-H Activities/Curriculum Participation Form

Please return this form to UCCE 4-H Office:
tawatkins@ucanr.edu or fax (559) 852-5166

School/Program Name:																		
Location:					Project/Activity Complete:													
Date Complete:					Presenter/Teachers:													
Youth (Y) or Adult (A)	Grade in School (or Age if not in school)	# of Male	# of Female	List by Race or Ethnicity (Mark all that apply) should	Hispanic	Asian	Black African-American	Native Indian/Alaskan	Native Hawaiian/Pacific Islander	White	Prefer not to State	Living Farm	Living Rural (under 10,000)	Living Town (10,000 to 50,000)	Living Suburb (less than 50,000)	Living Central City (more than 50,000)	Enroll in 4-H? (Y or N)	
Example:																		
Y	5th	10	12		9	2	3	1	1	6		2	10	10	0	0		
Y	4th	5	10		8	2	1	0	0	4		4	10	1	0	0		
A	Adult	1	2		2	0	1		0	0		0	0	3	0	0		