WINNEBAGO COUNTY



**GOAT PROJECT RECORD FOR 20**

|  |  |
| --- | --- |
| Things I plan to do and learn this year in this project are: (complete this box between Jan. 1 — May 1) | Check When Done |
|  |  |
|  |  |
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**Ways You Received Help This Year Include:**

**(check all that apply)**

**Exhibits in This Project:**

**Item Placing**

(additional page may be added)

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|  | Attended project training offered by my club |
|  | Attended project training offered at the county level |
|  | Attended project training offered at District or State Level |
|  | Guidance from 4-H Leader/4-H Club |
|  | Guidance from Parent/Guardian/Other Adult |
|  | Reading and use of 4-H project guides |
|  | Reading and use of literature, books, audio visual resources |
|  | Own knowledge |
|  | Help from friends/other youth |
|  | Other (describe) |

What did you learn or enjoy in the project this year?

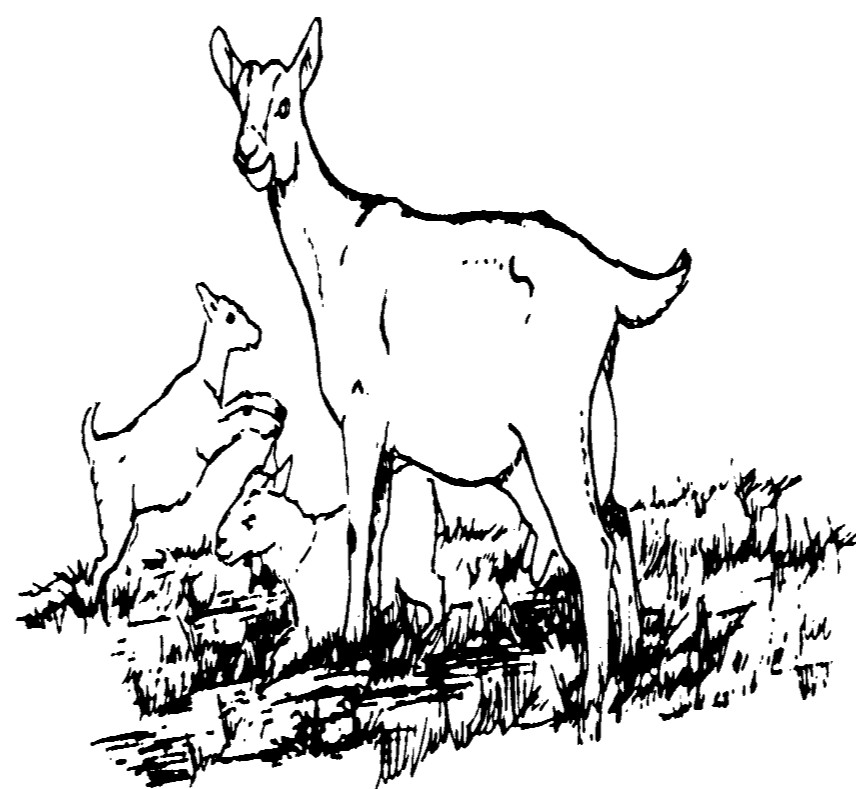
What project related skill(s) would you like to learn or improve?

**GOAT PROJECT ANIMAL IDENTIFICATION**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Identify all animals carried this year. Indicate for each whether owned (O), partnership (P), or management (M). | | | | | | |
| Animal Name | Breed | Sex  M or F | Tattoo/ Ear Tag | Birth  Date | O, P, M | Value |
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| **Health Care** | | |
| Date | Veterinarian Treatment, Vaccinations, Hoof Trimming, Other Health Care | Cost |
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List at least 2 goat industry related careers that you can identify.



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| --- | --- | --- |
| **Other Project Expenses** | | |
| Date | Equipment, Supplies, Trucking, Show Entry Fee, etc. | Cost/Value |
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Are you interested in a career related to the goat industry?

Yes\_ No\_ Maybe\_

**Project Worth Statement**

Has this project been worthwhile to you? Why or why not?

Revised 11/2006