Buffalo County 4-H/FFA Meat Animal Project Educational Requirement Report

This sheet must be successfully completed and returned to the UW-Extension Office by the <u>Friday before the Fair</u>.

NAME:				CLUB/CH	IAPTER:	
Species (check one)	Chickens	Beef	Goat	Sheep	Swine	Committee Approval
What was the name of	of the education	nal worksho	p you atten	ded?	·	
Date & Location of wo	orkshop you att	ended:				
What new skills did yo	ou develop or k	nowledge d	lid you learı	1?		
How will you apply th	ese new skills o	or informati	on to impro	ve the quality	of you mea	t animal this year?
Project Member Signature				Member's Parent Signature		

Attach proof of attendance (if applicable) and return by Friday before the Fair to:

UW-Extension Office 407 S. Second St.; PO Box 276 Alma, WI 54610 (FAX) 608-685-6259