

Check the areas you exhibited in:

___ Field Crops

___ Fruits

___ Vegetables

___ Plate of Vegetables

___ Vegetable Boxes

Number of Years Plant & Soil Science (horticulture) Project: _____

What are your goals for this project?

A. _____

B. _____

Type of Plant(s) Planted/Grown: _____ Date: _____

Type & Amount of Fertilizer/Plant Food Used: _____

Date Harvested: _____ Yield: _____

If applicable: Date Pruned: _____ Date Transplanted: _____

Explain weed & insect control used: _____

Number of hours spent on exhibit: _____ Date completed: _____

Cost: _____ Income: _____

Type of Plant(s) Planted/Grown: _____ Date: _____

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Growing weather (Amount of rain /Interval of rainfall, measured rain gauge, irrigation)

PROJECT MEETINGS

Number of project meetings held: ____ Number I attended: ____ County meetings I attended: ____

Number of hours spent on exhibits: _____

Summary of project work (challenges experienced, resources used, knowledge shared, progress made toward achieving goals or goals achieved, and what you will do differently next year).

Projects entered for fair	Project completed ✓	Ribbon placement

Please include photo(s) of your work in progress and the completed project