



Jefferson County Clover Kids

Animal Project Records

(This form is encouraged, but not required to show animals as a Clover Kid)

Year: _____

Please circle your animal type: Dog Pet Lamb Goat Calf

Name: _____ Age: _____ Grade: _____

Clover Kids Group: _____

Animal's Name: _____ Birth Date: _____ Breed: _____

Youth are encouraged to attach up to 3 pictures.

Where did you keep your animal?	
What did you feed your animal?	
What was the best part of raising your animal?	
What was the most challenging part of raising your animal?	