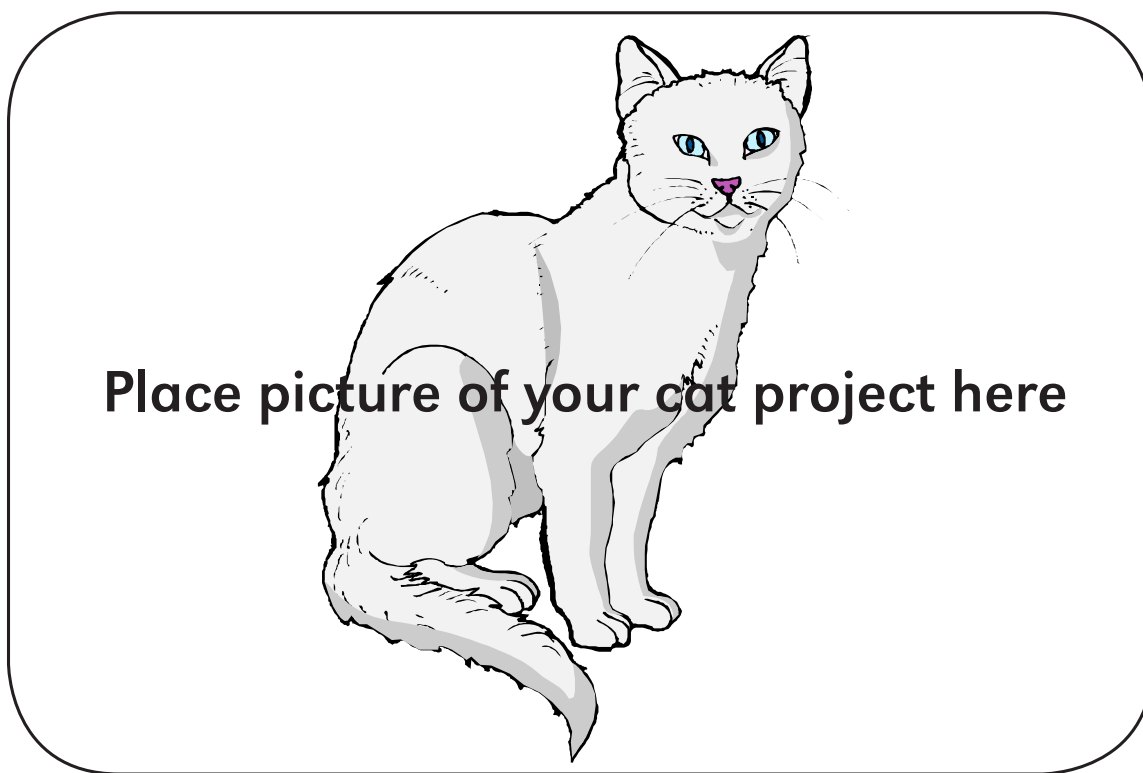




# 4-H Cat Project Record Book



Member Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

Street Address: \_\_\_\_\_ Grade: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

## **Introduction:**

This project book has been created specifically for 4-H members enrolled in the 4-H Cat Project. Keeping a record book is an important part of the project. It will help you set goals for the project year, record your accomplishments and help guide your efforts to keep important records on your cat(s). This project is for those who want to learn how to care for their cat(s), keep their cat(s) healthy and contented, know the cost involved in raising a cat, and become a responsible cat owner. In addition, project participants will practice important life skills such as decision-making, communicating with others, leading self and others, planning and organizing, and accepting responsibility.

## **What is a 4-H Project?**

A project is a subject or topic that you learn about in 4-H. It is also something you do or make, with knowledge and skills you learned in the project. In this case, your project is Cats. You learn about your project from attending club meetings and educational workshops, and from working with adult and other 4-H members. You can also learn from field trips and camps, by participating in shows and competitions, as well as from your family and self-study. The Cat project is for kids who love cats and want to learn about them.

## **Why Complete a Record Book?**

A record book is a way for you to learn. Here are some important reasons why 4-H expects you to complete a 4-H record book for your project.

Keeping a 4-H record book will help you...

- To organize yourself
- Set reasonable goals for yourself
- Appreciate what you've learned this year from the goals you reached
- Recognize what you've learned in your 4-H project this year and track your progress and successes from year to year
- Explain what you've learned
- Keep track of costs of your project
- Gather information needed to apply for awards and scholarships
- Complete applications and resumes for jobs and college
- Meet requirements to participate in some county, state, and national 4-H events

## **End-of-year Signatures**

Due to the University of Nebraska-Lincoln Extension in Lancaster County office by July 15.

By signing below, I am stating I have completed this record book myself and to the best of my knowledge, the information included is correct.

4-H member signature \_\_\_\_\_ Date \_\_\_\_\_

4-H parent/guardian signature \_\_\_\_\_ Date \_\_\_\_\_

## **Guidelines for the Cat Project Record Book**

One record book can be completed for all of your project animals. Start your record book at the beginning of the 4-H year (in September or when you join) and keep track of all your expenses and receipts during the year. It is important to update your record book monthly. Keep your book neat and complete.

Start the 4-H year off by setting at least three goals to complete. These goals could include “Cat Care Skills” or “Personal Development Activities.” To expand your horizons, try to accomplish new skills each year you are in the project.

A record book should be kept in a folder. It is recommended you save your record books from previous years. That way, you can easily compare your progress and achievements throughout your years in 4-H. It will also help you when you apply for awards, jobs, college, etc.

## **4-H Member Program Growth Ideas**

In general, all 4-H members are challenged to meet the following standards each year. These are just suggestions and your individual club may have additional requirements.

- Complete a 4-H project, doing your own work with minimal assistance from parents or others, including being responsible for the physical care and training of the animal(s) to the fullest extent.
- Complete a project record book.

# Information about My Cat

*(Use One Sheet per Cat)*

Name of cat \_\_\_\_\_

Breed of cat (if known) \_\_\_\_\_ Coloring \_\_\_\_\_

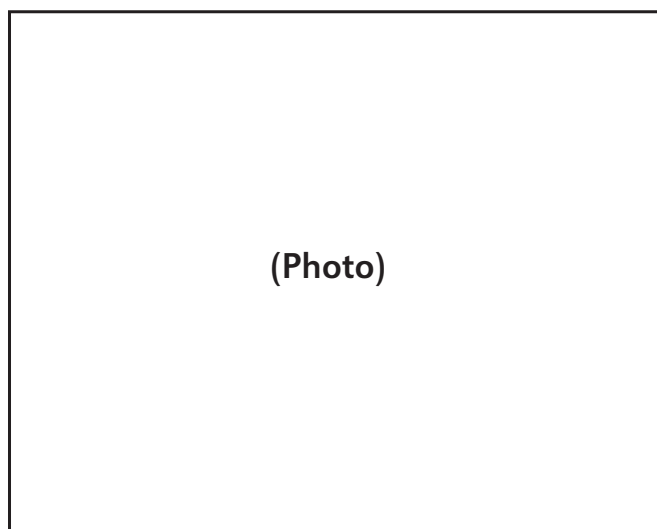
Longhair \_\_\_\_\_ Shorthair \_\_\_\_\_ (check one)

Sex of Cat: Male \_\_\_\_\_ Female \_\_\_\_\_

My cat's age is: (if known) \_\_\_\_\_ Year of birth: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_

Unknown age but estimated: \_\_\_\_\_

## My cat was (check all that apply):



\_\_\_ Already a family cat

\_\_\_ Gift

\_\_\_ Purchased

\_\_\_ Adopted from a shelter or rescue

\_\_\_ Other (please explain)

\_\_\_\_\_

\_\_\_\_\_

My cat was acquired at: \_\_\_\_\_

*(name of store, breeder, animal shelter, rescue ,etc)*

Was a fee charged? \_\_\_\_\_

Date I started my project: \_\_\_\_\_ Date I completed my project: \_\_\_\_\_

Description of my cat (include size, weight, color, and other identifying characteristics):

\_\_\_\_\_

\_\_\_\_\_

Average time I spend with my cat each day *(observing, playing, exercising, caring, etc.):*

## Cat Care

*(Use One Sheet per Cat)*

How often do you clean your cat's litter box? \_\_\_\_\_

What kind of food do you feed your cat? \_\_\_\_\_

How often do you clean your cat's food and water containers? \_\_\_\_\_

How often do you play with your cat? \_\_\_\_\_

How often do you brush your cat? \_\_\_\_\_

How often do you take your cat to the veterinarian? \_\_\_\_\_

What is your cat's favorite food? \_\_\_\_\_

What is your cat's favorite place? \_\_\_\_\_

What is your cat's favorite toy? \_\_\_\_\_

What is your cat's favorite thing to do? \_\_\_\_\_

Does your cat do any tricks? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

What do you do to keep your cat healthy? \_\_\_\_\_

Does your cat have any particular habits? \_\_\_\_\_

Has your cat ever:

Been sick? \_\_\_\_\_

Been hurt? \_\_\_\_\_

Been lost? \_\_\_\_\_

Been neutered or spayed? \_\_\_\_\_

Do you have other pets? (include their names and species):

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# Annual Feline Health Care Practices

*(Use one sheet per cat)*

For your cat to achieve and maintain optimal health, your local veterinarian should carry out the following health care practices each year. Please include the date for any health practice(s) your vet performs on your cat yearly.

Vaccinations	Date	Parasite Control	Date
Panleukopenia	_____	Fecal Exam	_____
Rhinotracheitis	_____	Deworm	_____
Calicivirus	_____	Product:	_____
Chlamydia	_____	Leukemia	_____
Rabies	_____	External Parasite Control	_____
		Product:	_____

Physical Exam \_\_\_\_\_

Dental Prophylaxis \_\_\_\_\_

Blood Work \_\_\_\_\_

Veterinarian \_\_\_\_\_

Clinic \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Does your cat have any medical conditions that require special medication(s)? \_\_\_\_\_ Yes \_\_\_\_\_ No

What medication(s)? \_\_\_\_\_

How often do you administer? \_\_\_\_\_











