



# Poweshiek CO. Clover Kids Project Goal Sheet

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Clover Kids Club: \_\_\_\_\_

Project Area: \_\_\_\_\_

*Please complete and bring with you to Indoor Judging. This is not a required form for Clover Kids but is good practice for when they reach 4<sup>th</sup> grade.*

**1. Why did you Chose this Project/What was your goal?**

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**2. What was your biggest problem with this project and how did you solve it?**

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**3. What did you learn with this exhibit and did you have fun?**

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