

# Microwave Magic Level A Year 1 Record Sheet

Name \_\_\_\_\_ Grade \_\_\_\_\_ Year \_\_\_\_\_

Name of Club \_\_\_\_\_ Year in Club Work \_\_\_\_\_

County \_\_\_\_\_ Township \_\_\_\_\_

1. List three new things you learned using the microwave.

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2. What types of cookware are recommended for use in the microwave?

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3. List at least two safety tips you practiced while completing your project.

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4. Did you give a demonstration on your microwave project? \_\_\_\_\_ Yes \_\_\_\_\_ No

Name of demonstration \_\_\_\_\_

5. List the foods you prepared in the microwave this year.

| Food Prepared | Number of times prepared | Amount prepared | Total cooking time |
|---------------|--------------------------|-----------------|--------------------|
|               |                          |                 |                    |
|               |                          |                 |                    |
|               |                          |                 |                    |
|               |                          |                 |                    |

6. Write in the number of times you completed these activities.

| Activity                  | Number of Times |
|---------------------------|-----------------|
| Tried new recipes         |                 |
| Set table                 |                 |
| Helped serve family meals |                 |
| Cleaned up kitchen        |                 |
| Shopped for groceries     |                 |
| Put away groceries        |                 |

I have reviewed this record and made comments about the individual's progress and project completion.

Signature of Project Helper \_\_\_\_\_ Date \_\_\_\_\_