

Microwave Magic Level C Year 3 Record Sheet

Name _____ Grade _____ Year _____

Name of Club _____ Year in Club Work _____

County _____ Township _____

1. List four safety tips that you practiced while completing this project.

2. Name the different types of candy you cooked. How did you know when they were done cooking?

3. How do you think you have helped yourself and your family by taking this project?

4. Name of demonstration _____

Date of demonstration _____ Location 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
Helped serve family meals	
Planned and cooked entire meal	
Collected recipes	
Tried new recipes	
Shopped for groceries	
Taught a sister, brother, or someone younger to cook in the microwave	
Helped younger 4-H'ers with activities in their microwave manual	

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

Signature of Project Helper _____ Date _____