

# Microwave Magic Level D Year 2 Record Sheet

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

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

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

1. What three new things did you learn in using the microwave this year?

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2. How would you compare the food quality of baked items—such as the pie or cake made in the microwave oven verses the conventional oven?

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3. What did you learn about adapting recipes?

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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
Planned special occasion	
Collected recipes	
Tried new recipes	
Set table	
Planned and cooked entire meal	
Kitchen cleanup	
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 \_\_\_\_\_