

**Club Name:** \_\_\_\_\_

**4-H Level:** \_\_\_\_\_  
*(Cloverleaf, Junior, Senior)*

**County:** \_\_\_\_\_

**Grade(s):** \_\_\_\_\_

\*For Essential Elements, please list the number(s) covered with each meeting below:

- 1.) A positive relationship with a caring adult
- 2.) An inclusive environment
- 3.) A safe emotional and physical environment
- 4.) Opportunity for Mastery
- 5.) Engagement in Learning
- 6.) Opportunity to see oneself as an active participant in the future
- 7.) Opportunity for self-determination
- 8.) Opportunity to value and practice service to others

Meeting Date:	Meeting Topic:	Activity/Learning Experience:	Essential Element(s)* Covered:	Youth Leadership Role(s):	Events to promote:

