



4-H Seeds of Service
Service Learning
Activity Report Form

4-H Group/Club _____

County _____

Service Project _____

Date _____

Location _____

Participants: Youth _____ Adults _____

of Hours _____

Briefly describe the service below.

How did the participants reflect on the service (drawings, song, journaling, etc.)

In which of these service priority areas does the project fit? (Select one)

- Environment
- Health
- Public Safety
- Education
- Other Human Needs
- Other

Additional comments?

Please return forms to your county 4-H Agent at your next 4-H meeting.