CLOTHING & TEXTILES EVALUATION FORM

Date of Birth _____/_____/_____
Month Day Year

Personalization

Cloverbud (ages 5-8) _____
Junior (ages 9-14) _____
Senior (ages 15-19) _____

(Top portion to be filled out by the 4-H member)

Member's Name _____ Telephone Number _____

Club Name _____ Years in Project _____ 4-H Leader's Name _____

Garment Made _____ Color _____

What new skill(s) did you learn? _____

Method of Personalization – Check One

_____ Applique _____ Beading _____ Embroidery (Type:) _____ Needlepoint

_____ Fabric Paint _____ Quilting _____ Silk Screen _____ Tie Dye _____ Other

Category	Needs Improvement	Satisfactory	Very Good	Comments
Cleanliness				
Neatness				
Appropriate for Fabric				

Originality Award: Yes _____ No _____
Outstanding Workmanship: Yes _____ No _____
Outstanding Presentation: Yes _____ No _____

Leader's Name _____