

OHIO STATE UNIVERSITY EXTENSION



**2020 Quality Assurance Program Documentation of Attendance**

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*Note: This is your only receipt of attendance. It is the responsibility of the youth to turn this form in to the home county’s educator.*

Name County in 4-H

Name of 4-H Club

The above named youth participated in County’s Quality Assurance program.

Educator/QA Presenter

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Date Trained/Test Given

Expiration Date

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