OHIO 4-H SHOOTING SPORTS INSTRUCTOR
Hours – Mileage Quarterly Report

Quarter – Please check appropriate box below
☐ January - March  ☐ April - June  ☐ July - September  ☐ October - December

Name: __________________________________________ Date: ________________
Phone: ________________________________________
E-mail Address: ______________________________________
County: ________________________________________

Teaching disciplines at your 4-H club(s)
4-H Club Name: ____________________________ Preparation Hours: _______
Mileage: ________________________________ Teaching Hours: _______

Teaching disciplines at adult leader workshops
Please check appropriate box below
☐ Spring Workshop  ☐ Fall Workshop
Preparation Hours: _______ Teaching Hours: _______ Mileage: _______

Teaching disciplines at Ohio 4-H Shooting Education Camp
Preparation Hours: _______ Teaching Hours: _______ Mileage: _______

Teaching disciplines at Farm Science Review
Preparation Hours: _______ Teaching Hours: _______ Mileage: _______

Teaching disciplines, Judging, at County and State Fair(s) or Other Events (Please Specify)
Event: ________________________________________
Preparation Hours: _______ Teaching Hours: _______ Mileage: _______

Please send reports to Larry Harris before the end of each quarter or after each event.

Larry Harris
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4-H Youth Development
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