**Youth Name: Date: 4-H Club or Program:**

**4-H Age: (**age as of Jan 1st of 4-H Year) \_\_\_\_\_\_\_\_\_ **Years in 4-H: Title of Presentation:**

**Length of Presentation** \_\_\_\_\_\_\_\_\_\_\_ Start \_\_\_\_\_\_\_\_\_\_\_\_\_ End \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total

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| **CLOVERBUDS ARE NOT SCORED – THIS EVALUATION FORM IS TO GIVE CLOVERBUDS CONSTRUCTIVE FEEDBACK TO HELP THEM IMPROVE ☺** |

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| PRESENTER | **Considerations** | **Things you did Well** | **Things that could be Improved** |
| **Dress** | Dressed appropriately for cooking, including apron, hair is pulled back, hands and face are clean |  |  |
| **Use of Voice** | Loud enough to be heard clearly; pleasant tone to listen to; spoke at a good pace |  |  |
| **Posture/Poise** | Makes eye contact; stood up straight; generally confident in their delivery |  |  |
| **Enthusiasm** | Excited about the recipe they are presenting with obvious interest in it |  |  |
| **Responding to questions** | Answers questions with an informative response; may answer ‘do not know but will look up answer’ |  |  |
| SUBJECT | **Considerations** | **Things you did Well** | **Things that could be Improved** |
| Recipe – age and experience | Recipe is fitting for a Cloverbud – neither too easy nor too complicated |  |  |
| Safety | Works safely and hygienically; draws attention to the importance of both to the audience. |  |  |
| NYS Ingredient | Uses a NYS ingredient and provides information and interesting facts on its production/source |  |  |
| Measuring and Techniques | Demonstrates correctly how to measure at least 1 wet and 1 dry ingredient and uses different techniques e.g. peeling, blending, chopping, cooking |  |  |
| Delivery | **Considerations** | **Things you did Well** | **Things that could be Improved** |
| Introduction | Introduced themselves, their club, and the 4-H project and/or recipe |  |  |
| use of Notes or Visual Cues | Has good notes/visual cues and used them as needed to stay on track for the presentation |  |  |
| Illustration | Illustration of dish is legible and attractively presented |  |  |
| Appearance and/or Taste of Dish | The dish looks and/or smells appetizing |  |  |
| planning and Practice | Organized; Clearly had a plan and practiced the presentation |  |  |

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| **Additional Evaluator Feedback – Constructive and Encouraging Comments** |
| **NOTE: Allowances and/or accommodations will be made where possible for disadvantaged youth and those with special needs as appropriate** |

**Evaluator Name 1**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Evaluator Name 2:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_