

2025 Fairfield County Fair

Market Sheep Skillathon

Name: Club: Age: Skillathon Type:	Is your project book 4-H or FFA? 4-H FFA
	Office Use Only: Grade Finalized Date: _____

Station 1: Interview (20 PTS)	Judges Initials: _____	Station 1	
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General Knowledge of Project: _____ # ANSWERED X 2= _____ (5 Questions, 10 PTS total)
Interview Etiquette: _____ (10 PTS Total)

Station 2: Breeds (20 PTS)	Judges Initials: _____	Station 2	
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of Breeds Correct: _____ X 2= _____ PTS (2 PTs per question, 10 breeds total)

Station 3: Diseases (20 PTS)	Judges Initials: _____	Station 3	
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of Questions Correct: _____ X 4= _____ PTS (4 PTs per question, 5 questions total)

Station 4: Feed ID(20 PTS)	Judges Initials: _____	Station 4	
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of Samples Correct: _____ X 2= _____ (2 PTS per sample, 10 samples total)

Station 5: Project Book (20 PTS)	Judges Initials: _____	Station 5	
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Please hand in your book at your interview station. It will be graded at a different time. You will receive your book after it is graded, at the fair. Thank you!

Please have participant sign here at Feed ID Station:

Total Score (out of 100)

Name:

Club:

Age: Skillathon Type:

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4-H Market Sheep Project Record Book Rubric

A	B	C	
Complete	Partial	Blank	
			<u>4-H Information & Interest Areas</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Topic of Interest (pg. 3-4)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Market Lamb Project Levels and Activities (pg. 5-11)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. 4-H Project Learning Experiences (pg. 12)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Leadership and Citizenship Activities (pg. 13-14)
			<u>Quality Assurance</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Quality Assurance Medicine Label/Treatment Record Activity (pg. 18)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Treatment Record for Vaccines, Medication, and Medicated Feed (pg. 20)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Medication Label (pg. 21)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. How to Read a Feed Tag (pg. 23)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Attach Your Own Feed Tag (pg. 24)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Quality Assurance Questions (pg. 26)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Youth and Parent/Guardian Agreement (pg. 27)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12. Use Drug Residue Tests when Appropriate (pg. 28)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13. The Care You Give Your Animals (pg. 29)
			<u>Animal Records</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14. Market Lamb Project Animal Inventory (pg. 35)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Miscellaneous (Operating) Expense Record (pg. 36)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Feed Expense Record (pg. 37)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17. Rate of Gain (pg. 38)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Learning Experiences (pg. 38)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Growth Chart (Must Complete 1) (pg. 41-44)
			TOTAL CHECK MARKS
(2 pts/each)	(1pt/each)	(0pt/each)	
			POINTS PER COLUMN

TOTAL SCORE: _____/38