



Delaware 4-H Diamond Clover Award Program  
***Level Two (Aquamarine) - Plan & Report***

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Town/State/Zip \_\_\_\_\_  
4-H County *or Military 4-H Program* \_\_\_\_\_  
Club(s) \_\_\_\_\_  
Age \_\_\_\_\_ Birth Date \_\_\_\_\_ Years in 4-H \_\_\_\_\_ (*including this year*)

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**Level Two - Diamond Clover Plan** (*complete at the beginning of the 4-H year*)

Check at least **four** tasks/skills you plan to accomplish this 4-H year:

- \_\_\_ Attend at least 60% of club meetings
- \_\_\_ Compete in a county 4-H or military 4-H program contest
- \_\_\_ Attend at least two county 4-H or military 4-H program activities or workshops
- \_\_\_ Help with a club or community service-learning project
- \_\_\_ Help with a club or community fundraiser
- \_\_\_ Attend a day or resident camp, conference or overnight experience representing 4-H
- \_\_\_ Complete at least one 4-H project

***I have reviewed this plan and find it complete, accurate and adequate to meet the requirements of Level Two (Aquamarine) of the Delaware 4-H Diamond Clover Award Program.***

4-H Member Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Club Leader Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_

**Level Two - Diamond Clover Report** (complete at the end of the 4-H year)

List the tasks completed/skills learned and the date completed below.

**First Task/Skill** \_\_\_\_\_ **Date** \_\_\_\_\_

Explain what you did/learned: \_\_\_\_\_

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**Second Task/Skill** \_\_\_\_\_ **Date** \_\_\_\_\_

Explain what you did/learned: \_\_\_\_\_

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**Third Task/Skill** \_\_\_\_\_ **Date** \_\_\_\_\_

Explain what you did/learned: \_\_\_\_\_

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**Fourth Task/Skill** \_\_\_\_\_ **Date** \_\_\_\_\_

Explain what you did/learned: \_\_\_\_\_

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Comments \_\_\_\_\_  
\_\_\_\_\_

(Attach additional pages as needed)

*I have reviewed this report and find it complete, accurate and meeting the requirements of Level Two (Aquamarine) of the Delaware 4-H Diamond Clover Award Program.*

4-H Member Signature \_\_\_\_\_ Date \_\_\_\_\_

4-H Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

4-H Club Leader Signature \_\_\_\_\_ Date \_\_\_\_\_