

This sheet must be completed if entering Division I-A Vegetables

Vegetable Growing Information Sheet

Kind of Vegetable	Planting Record # of Plants in Row	Date Planted

1. How did you use your Vegetables? _____

2. What insects, diseases, and pests did you find? How were they controlled? _____

3. What special treatments or fertilizers did you use? _____

4. Which experiences were most interesting in this project? _____
