OZAUKEE COUNTY 4-H

**Care to Share Form**

This form has been designed to provide valuable input to Ozaukee County 4-H. Please print all information and use additional pages if more space is needed. An online version of the form can be found at: <https://ozaukee.extension.wisc.edu/4-h-youth-development/4-h-forms/>.

Once completed, it will be distributed to the appropriate individual or group to address the issue or concern. ***All three sections MUST be complete to be addressed.***

**Section 1:** Describe the current situation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Section 2:** Describe the problem with the current situation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Section 3:** Give your suggestion(s) for a possible solution\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Please Print:**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-Mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Return completed form to:** Ozaukee County 4-H

 121 W Main St / PO Box 994

 Port Washington, WI 53074

 e-mail to: colleen.machut@wisc.edu

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*Adapted from John de Montmollin – Kenosha County 4-H© 2005 Board of Regents of the University of Wisconsin System, doing business as the Division of Cooperative Extension of the University of Wisconsin-Extension.*