# Chapter 2: MyHealth, MyPlate, MyMind

***Two easy steps; benefits to 4-H: Priceless!***

**1. Fill in the blanks, check the applicable boxes.**

**2. Pop in the mail. Send to:**

iThrive 4

State 4-H Office

2801 Second Street

Davis, CA 95618-7774

**Alternately, you may complete this survey online at** [**https://ucanr.edu/survey/survey.cfm?surveynumber=13943**](https://ucanr.edu/survey/survey.cfm?surveynumber=13943)

Your Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Your County\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We completed this chapter on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date)

Names of youth in attendance for this lesson:

We delivered this lesson in a:

\_\_\_Leadership Project Meeting (club based) Club Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_County-wide Leadership Project Meeting

\_\_\_Other (please describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

These parts were completed:

|  |  |  |  |
| --- | --- | --- | --- |
| **Activity** | **During the meeting**  | **By youth at home** | **Didn’t do it** |
| iexercise |  |  |  |
| iexplore MyPlate, MyHealth, MyMind |  |  |  |
| ireflect |  |  |  |
| istretch |  |  |  |

We modified these parts:

\_\_\_iexercise (please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_iexplore (please explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ireflect (please explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_istretch (please explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_