

Beekeeping Record

Units 2-4



2025-2026

This e-record is for 4-H members who have their own hives.

Please fill out years in project, name, etc. Then print and sign this form at the start of your project.

Unit Number	Years in Project

Name

4-H Club

County

Birth Date

Age as of December 31 of current 4-H year

4-H Age Group (check one):

☐ Junior (8-10)

☐ Intermediate (11-13)

☐ Senior (14-18)

PROJECT AGREEMENT

To be signed at the beginning of the 4-H year.

I will be responsible for feed, care, and management of my bees. I will keep good records and finish my record book to complete my project. I will be responsible for management decisions concerning the health, welfare, profitability, and product quality of my project.

Member Signature

Date

As a parent or supporter, I realize that animal projects require a considerable amount of expense and labor. I will support this youth in his/her efforts and allow him/her to learn as much as possible from the experience. The youth is expected to be responsible for labor, care, and management decisions affecting the project. I will help where needed by giving guidance and instruction.

Parent Signature

Date

Record must be printed in landscape format. Records may be completed on the computer or neatly hand-written

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PROJECT PLAN AND GOALS

It is important to write goals each year. Goals help you learn more about your project and your life. It is also important to think of how you will accomplish your goals. Goals may be personal or project related. Answer the questions below about your beekeeping project. Use complete sentences for your Goals but not Project Plan.

Project Plan

How many hives do you plan to have?	
What races of honeybees do you plan to have?	
When you choose your races, what will you look for?	
What will you feed your honeybees?	
If you are unsure what to do, who can you go to for help about your project(s)?	

Goals

What is your goal? What do you want to accomplish in 4-H this year?	
"To Do": What is one thing you can do to help you accomplish your goal?	

EQUIPMENT/SUPPLIES INVENTORY

Record equipment, tools, hive woodenware and any other items used for your project this year. Records things that you own and things that you borrow. **Remember to include items you have listed in your Other Expense Record (pg. 8). Record all hives in Colony Inventory (pg. 4) and/or Other Expense Record as appropriate.** Add more lines/pages as needed.

Start this list at the beginning of the 4-H year and add to it anything you use for your project.

Item
Ex. Bee suit with veil
Ex. Hive tool

Item
Ex. Langstroth deep box
Ex. Smoker

COLONY INVENTORY

Record information below about each of your hives. You may use additional pages as necessary.

Hive ID:	
Race of Bees:	Date Established:
How established (package, nuc, swarm, split)	
Queen age (or year)	Notes (if applicable)

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MANAGEMENT/ HEALTH RECORD

Enrolling in a beekeeping project requires you to take responsibility for the health and treatment of your hive(s). Record all health care for your hive(s) including medications, varroa mite checks as well as management care such as adding supers, exchanging drone frames, making splits, etc. **Also include supplement and medicated feeds (check the feed tag). Remember to record the cost of health care services and supplies in Health Expense Record (pg. 6).** Do not leave any blanks. Record N/A where applicable.

Date	Hive ID	Management Activity	Notes (any treatment given, presence of diseases, frame count, etc.)	Lot Number Expiration Date	Person Who Administered Treatment
Ex. 5/15	192	Hive Insepction/varroa inspection	Mite count 3%, treated with formic acid, fed sugar syrup	Lot:123456 Exp: 2019	Joe Kelly
6/12	192	Hive inspection	Frame bee count = 12, eggs, pupa, larvae, saw queen!	N/A	N/A
6/24/2019	192	Hive Inspection/mite count	Mite count = 0!, Frame count = 24, added 2 medium supers	N/A	N/A

HEALTH EXPENSE RECORD

Record what you buy for health care for your hive(s). **Remember to include veterinarian/service fees and anything you buy listed on your Health Record (pg. 5). Record supplements and medicated feed in in Feed Expense Record (pg. 7).** Record "no expenses" if there were no health expenses this 4-H year. Add more lines/pages as needed.

Date	Health Item	Paid To	Total Cost
Ex. 5/15	Formic Acid Pads	ABC Bee Shop	\$22.89
Ex: 5/15	VITA-DROPS	XYZ Pet Store	\$8.49
TOTAL HEALTH EXPENSE			

FEED EXPENSE RECORD

Record all feed you buy for your hive(s) this year such as sugar, protein supplements, and any probiotics. Record the amount (include units) and cost. **Record pasture if you pay to rent it.** Add more lines/pages as needed.

Date	Item	Paid To	Total Amount	Total Cost
Ex. 5/15	Sugar	XYZ Grocery Store	25 lbs	\$14.99
Ex: 7/10	Pasture--hive access	EFG Farm	annual	\$50.00
TOTAL FEED EXPENSE				

OTHER EXPENSE RECORD

Record the costs for non-feed and non-health items such as supplies, equipment purchase/lease, tools, workshop/class fees, gas for car or truck, farm utilities (except water), etc. Record "no expenses" if there were none this 4-H year. Add more lines/pages as needed.

Date	Item	Paid To	Total Cost
Ex: 4/15	2 medium boxes with frames	RST Ranch Supply	\$90.00
Ex: 5/1	Bear exclusion fence (borrowed)	Colorado Parks and Wildlife	\$0.00
TOTAL OTHER EXPENSE			

INCOME RECORD

Record any money you earned this year. Income may be from selling hive products, equipment, or pollination services, etc. Record "no income" below if you did not receive any money this year.

Date	Item/Animal ID	Income From	Income
Ex: 8/15	Fair Premiums	County Fair	\$15.00
Ex: 8/15	3 pounds of honey	Mrs. Jones	\$24.00
TOTAL INCOME:			

FINANCIAL SUMMARY

Record your total income and expense for each project and the total for all projects to see if you made or lost money on your projects this year.

	Honey:	Hive Products:	Pollination:	Other:	Total All Projects	Directions
Income						
A. How much money did you earn?						Total Income (pg. 9)
Expenses						
B. How much did you spend on health expenses?						Total Health Expense (pg. 6)
C. How much did you spend for feed?						Total Feed Expense (pg. 7)
D. How much did you spend on other expenses?						Total Other Expense (pg. 8)
E. What are your total expenses?						B + C + D
Profit/Loss						
I. How much did you make/lose from your project(s)?						A - E

INVOLVEMENT RECORDS

4-H Members must complete a community service activity and a demonstration in order to complete their project. The 4-H program also provides additional opportunities for leadership, exhibition, and judging. **Record your involvement in these areas which may be within or outside of 4-H.** Record "none" or N/A where it applies. Add more lines as needed.

What did you do for your community? How did you practice citizenship?	Date, Hours	What did you learn?

What did you demonstrate? What speech(es) did you give?	Date	What did you learn?

How were you a leader or helpful to others? What leadership events did you attend?	Date	What did you learn?

Where did you exhibit/show? What judging activity(ies) did you do?	Date	What did you learn?

STORY AND PICTURES

It is suggested that you complete the following other requirements in a separate document such as in Microsoft Word and attach pictures on another page. Insert story and pictures before Project Completion (pg. 13).

Project Pictures

Include a minimum of four pictures each with a descriptive caption. **Include pictures that demonstrate the progress of your project.** Additional photos may be added.

4-H Story

Tell us about your 4-H experience in a story. The following may be used as a guide to help you in compose a story related to your project(s).

About Me

- * Tell how old you are and when you joined 4-H.
- * Tell why you joined 4-H.
- * Share about your interests or hobbies.
- * Tell about your future and career plans.

4-H Project and Activities

- * Describe your projects. Tell how they were successful.
- * Share what you would do differently if you were to try it again.
- * Describe what skills you have learned this year.
- * Tell about any adults or other 4-H Members who were especially helpful to you. Share how they were helpful.

Story may be typed or hand-written with 1 inch margins. Handwritten stories should be written on lined, white notebook paper and be legible. Typed stories should be on plain, white paper and no smaller than 12-point font. **Limit your story to a maximum of two (2) pages. Remember that good grammar, correct spelling, and complete sentences are important.**

GOAL REFLECTION

Goals help you achieve more when you review them each year. At the END of the year, answer the following questions in complete sentences.

Did you meet your goal this year (pg. 2)? Why or why not?	
Which "To Do's" did you complete?	
What helped you complete your goal? What challenges kept you from reaching your goals?	

PROJECT COMPLETION

I declare that the information in this book is correct and all 4-H requirements have been completed to the best of my knowledge. (This should be signed at the end of the project.)

Member Signature

Date

Leader Signature

Date

Parent/Guardian Signature

Date