

4-H Dairy Project Record Dairy Cow

Name: _____ Age as of Jan 1: _____ Year in Project: _____

This project is: Ownership Managerial Year in 4-H: _____ Junior Ldr: Yes No

Date this project started: _____ Date project or project year ended: _____

Things I want to learn about dairy calves this year.

To find the publications below, go to: <http://www.uwex.edu/ces/>. On the left side of the screen click on "Publications"; "Agriculture"; "Livestock and Poultry". Then scroll down to "Dairying". You will be able to click on most of the Dairy publications to read and/or print.

Check at least 4 of the dairy heifer topics you want to learn more about this year.

- Corn Silage Project, Management and Feeding (this publication must be ordered at a cost of \$5.00)
- Determining Pasture Condition
- Feeding Dairy Cows for Efficient Reproductive Performance
- Grazing Streamside Pastures
- Bigger Livestock Farms: Ideas for Governments and Citizens
- Flat-Barn Milking Systems
- New Standards for Sizing Milklines
- Seven Habits of Highly Successful Milking Routines
- Troubleshooting High Bacteria Counts in Farm Milk
- Youth and Dairy Cattle: A Safe Partnership

Read about the project topics you have selected in the references listed in parenthesis behind the topics. Then think about goals you will set for your dairy heifer project. Goals are things you want to do or learn to do. Write your dairy heifer project goals below. You may write more than one goal for each topic.

Topic	Project Goal

Write additional goals on a separate sheet of paper.

Approved Practices Used With My Project Calves

Cow Management: (check all that apply)

- Enroll herd in DHI or other production testing program

Other: _____

Other: _____

Other: _____

Cow Health: (check all that apply)

- Observe regularly for signs of infections disease
 Seek and follow herd veterinarian recommendations for vaccination program
 Enroll in a regular herd health maintenance program
 Design and maintain cow environment to keep cows clean and dry at all times to help control mastitis
 Observe during susceptible periods for signs of metabolic disease
 Enroll in DHI or other SCC option to monitor mastitis infections in herd
 Provide adequate ventilation to improve productivity and reduce respiratory infections

Other: _____

Other: _____

Other: _____

Feeding: (check all that apply)

- Test home-grown forages and balance rations around forages to meet nutritional needs
 Adjust rations to meet economic milk production potential and body conditions goals

Other: _____

Other: _____

Other: _____

Reproductive Management: (check all that apply)

- Breed cows to proven AI sires
 Record observed heat, breeding and calving dates, and service sire I.D. for all heifers and cows

Other: _____

Other: _____

Other: _____

Fitting and Showing: (check all that apply)

- Evaluate show cow's condition and adjust ration at least 2 months before show
 Wash cow every other week starting at least 2 months before show
 Brush cow's coat every day
 Trim feet 4 to 6 weeks before show, if needed
 Begin halter and lead training 3 to 4 weeks before show. Train in short daily sessions.
 Check and double check entry forms before turning in
 Organize equipment and papers ahead of time to leave for show

Other: _____

Other: _____

Other: _____

Feeding and Nutrition

Stage of Lactation:	<u>Feeds Fed</u>	<u>Pounds / Cow / Day</u>
<i>Dry</i>	<input type="checkbox"/> Hay	_____
	<input type="checkbox"/> Haylage	_____
	<input type="checkbox"/> Corn Silage	_____
	<input type="checkbox"/> Corn	_____
	<input type="checkbox"/> Protein	_____
	<input type="checkbox"/> Mineral	_____
	Other: _____	_____

Stage of Lactation:	<u>Feeds Fed</u>	<u>Pounds / Cow / Day</u>
<i>Early Lactation</i>	<input type="checkbox"/> Hay	_____
	<input type="checkbox"/> Haylage	_____
	<input type="checkbox"/> Corn Silage	_____
	<input type="checkbox"/> Corn	_____
	<input type="checkbox"/> Protein	_____
	<input type="checkbox"/> Mineral	_____
	Other: _____	_____

Stage of Lactation:	<u>Feeds Fed</u>	<u>Pounds / Cow / Day</u>
<i>Late Lactation</i>	<input type="checkbox"/> Hay	_____
	<input type="checkbox"/> Haylage	_____
	<input type="checkbox"/> Corn Silage	_____
	<input type="checkbox"/> Corn	_____
	<input type="checkbox"/> Protein	_____
	<input type="checkbox"/> Mineral	_____
	Other: _____	_____

TMR			
	Numbers	Ingredient	Pounds / Batch
Early Lactation - High Group (Single Group TMR)			
Number Cows Fed			
Pounds Per Cow			
Times Fed Per Day			
Pounds Fed / Cow / Day			
Late Lactation - Low Group			
Number Cows Fed			
Pounds Per Cow			
Times Fed Per Day			
Pounds Fed / Cow / Day			
Other TMR Group			
Number Cows Fed			
Pounds Per Cow			
Times Fed Per Day			
Pounds Fed / Cow / Day			

Project Activities

Shows and Exhibits		
Show Exhibited at	Animal Exhibited	Placing

Showmanship Record	
Date	Activity

Project Educational Activities, Demonstrations and Talks	
Date	Activity

Certification

I certify that this record is a true and accurate account of my dairy cattle project activity.

Project Member Signature

Date

Leaders Comments: _____

Parents' Comments: _____
