

**School Garden Grants Application for 2009-10
Buncombe County Master Gardener's Program**

Mission Statement: The primary mandate of the Buncombe County Extension Master Gardeners is education in the areas of environment, gardening, and horticulture. This mini grant is to be used to assist you in sustaining or creating school gardens. This grant must be used for applied, "hands-on" student activities.

Examples for appropriate grant supplies are seeds, plants, bulbs, soil conditioners, amendments, mulch, protective coverings, stakes, tools, etc.

Master Gardeners will be available to assist teachers and provide resources for the development of the school gardens upon request.

Date: _____ (*Applications due August 21st.*)

1. Name of School:

2. Address: _____ City: _____ St.: ____ Zip:

3. Contact: _____ Phone & Fax: _____

4. E-mail Address: _____

5. Which grant category are you applying for? ___ High School ___ Elementary School
___ Middle School ___ Other

6. Title of School Garden Project:

7. Does your program have special emphasis? If yes, please check below.

___ Nutrition ___ Service learning ___ After-School Only ___ In-School Only ___ In- &
After-School ___ Multicultural ___ Special needs population ___ Habitat/environmental
stewardship

8. School Calendar ___ Traditional (please provide dates of summer vacation) _____
___ Year Round

9. Participants involved: _____ Number of students _____ Number of teachers/staff _____ Number of community members

10. Is this program already in place? _____ Number of years program has been in place: _____

11. Amount of funding already received for this program:

12. Please describe your goals for the garden and how your program ties to your curriculum.

13. How do you plan to sustain your garden after the grant year? Who will maintain the garden during the summer months?

SUPPORTING INFORMATION

Use a separate sheet of paper for each item below. Please do not exceed one page per item. Be sure to include all three pages with your completed application form.

A. Project Overview

Please describe the youth who will participate, how they will be engaged in the garden, any innovative aspects of your program, and your ability to undertake this task. Indicate what work has been done to date toward implementing your plans. If you have an established garden program, please describe the benefits children have derived from their experiences. Include a brief list of what you will purchase and the estimated cost of each item if your program receives the School Garden Grant.

B. Supporting Photos

Please arrange and attach a few photos that will help us to better understand your program, participants, and garden site. Captions are helpful. (One page only.)

C. Garden Map

Draw a map of your garden site that includes: 1) location and dimensions of gardens and/or raised beds, and 2) location of walkways, roads, buildings, garden structures, and natural features. (One page only). (If you need help doing this, please do not hesitate to call).

D. Proposed Budget

Please note that our emphasis is with “hands-on” material to be used by the students. We do not fund large equipment. The average grant is in the \$250 range.

E. If chosen as a grant recipient, you will be expected to provide an evaluation, with pictures if possible, by May 30, 2010. Your description of how the grant funds were utilized will help us to gauge the effectiveness of the grants and to continue to support our local schools.

Teacher Signature: _____ Date: _____

Principal Signature: _____ Date: _____

Please mail information to: Buncombe County Extension Master Gardeners
School Garden Grant Fund
94 Coxe Avenue
Asheville, NC 28801

If you have any questions please contact the Extension Office at 255-5522.

Recipients of our school garden grants will be notified by mail by August 10, 2009.