

Master Gardener Alumni Association of Washtenaw County Community Gardening Grants

Description and Selection Criteria

1. Who can apply?
 - Any educational group, not-for-profit organization or other groups or persons providing horticultural education and/or horticultural therapy.
 - The applicant must be based in and serve residents of Washtenaw County.
2. What is required in the application?
 - A program plan describing the project, not to exceed two typewritten pages, that highlights the horticultural education and/or horticultural therapy aspects.
 - Appropriate documentation to verify the applicant's status, such as a cover letter from a representative of the governing/administrative body, clearly identifying the relationship.
 - A detailed description of how the grant will be used (such as specific costs for large items or groups of materials, plants, etc).
 - An explanation of all additional funding or other resources received for the project, if any. If other funding is available, what percent (%) of need has been met?
3. What are the limitations?
 - Projects requesting up to \$250.00 will be considered.
 - Grants will not be provided to support general operations (such as salaries, buildings, etc). Funds must be used to directly support the horticultural education and/or horticulture therapy aspects of the project.
4. What are the selection criteria?
 - Projects or programs that utilize the expertise of Master Gardeners during development or implementation.
 - Applicants seeking to strengthen existing programs or develop pilot programs.
 - Projects/programs that emphasize horticultural education and/or horticultural therapy.
5. What are the expectations for awarded projects?
 - That the funds are used for items specifically outlined in the grant application.
 - The Master Gardener Alumni Association expects successful awardees to report how the project turned out by correspondence and photos or by a short presentation at our annual meeting (third Tuesday evening in April of the following year).
6. Please be sure to complete all boxes on the application even if the information is duplicated.
7. Please be sure to include the e-mail address of the person who will be receiving communications regarding this application.

**Master Gardener Alumni Association of Washtenaw County
Community Gardening Grants
Application**

Application Deadline: March 31, 2011

**Return completed applications to: Master Gardener Coordinator, MSU Extension,
PO Box 8645, Ann Arbor, MI 48107**

Applicant Information:	
Name of person preparing this application:	
Name of Group/Organization:	
Address of Group/Organization: _____	
Email:	Phone:
Principal of Organization: (Attach documentation verifying applicants' status. See #2 in Description/Selection Criteria)	
Name:	
Email:	Phone:
Person to contact on matters regarding this application:	
Name:	
Address of contact person: _____	
Email:	Phone:
Affiliation with this application:	
Title of Project/Program:	
Amount Requested: \$	

Please complete the following so that funds may be directed to the proper person/address. Check Payable to: _____
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