 Growing Lunch

|  |  |
| --- | --- |
| **Growing Lunch** | 2017-2018 Garden Grant Application  |

**School Information**

Note: Only one grant can be awarded per school.

|  |  |
| --- | --- |
| Name of school |  |
| Street Address |  |
| City, ST, ZIP Code |  |
| Grade(s) Participating |  |
| Projected number of students participating |  |
| Where will garden be located in relation to the school? (brief description) |  |

**School Garden Coordinator(s) Contact Information**

|  |  |
| --- | --- |
| Main Contact (Name) |  |
| Street Address |  |
| City, ST, ZIP Code |  |
| Phone |  |
| Best Time to Call |  |
| Email |  |

**Additional Volunteer(s)**

Please provide us with names and contact information of those that will also be helping with the school garden grant and if they are a teacher, parent, extension agent, farmer, etc.

|  |  |
| --- | --- |
| Name 1 |  |
| Email/Phone 1 |  |
| Name 2 |  |
| Email/Phone 2 |  |
| Name 3 |  |
| Email/Phone 3 |  |
| Name 4 |  |
| Email/Phone 4 |  |
| Name 5 |  |
| Email/Phone 5 |  |
| Name 6 |  |
| Email/Phone 6 |  |

**Agreement and Signature**

By submitting this application, I affirm that I am willing to care and maintain the garden throughout the school year, should caretaker duties transfer to someone else; I will notify MDAC of the changes.

|  |  |
| --- | --- |
| Name (printed) |  |
| Signature |  |
| Date |  |

**Funding Request/Project Plans**

Amount of grant money applying for: $\_\_\_\_\_\_\_

Please create and provide the plan for the garden, including timeline of the project, crops to be planted, a detailed budget of estimated expenditures, and how this will be used in the classroom to educate students.

Example Timeline Template:

Please provide a timeline of activities, including who will be responsible and the dates or months the activity will take place.

|  |  |  |
| --- | --- | --- |
| **Date(s)** | **Responsible Group** | **Project Activity** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Example Budget Template:

Please provide a detailed list of supplies that will be purchased and a price estimate of each item. It is important that we understand how the budget will be utilized.

|  |  |  |
| --- | --- | --- |
| **Budget Item** | **School Year(s)** | **Total** |
| **Supplies:** |  |  |
|  | $ | $ |
|  | $ | $ |
|  | $ | $ |
| **Total** | $ | $ |

List of specialty crops that will be planted:

Educational aspect:

Please provide an explanation how this will enhance the education of the students and what activities will be conducted:

**Return Completed Applications to:**

Susan Head Lawrence

Market Development Division

Mississippi Department of Agriculture and Commerce

P.O. Box 1609

Jackson, MS 39215

601-359-1196

susan@mdac.ms.gov