# 2016 Eat. Learn. Live. and Grow Grant Application Sponsored by Chartwells K12

#### Introduction:

Planting the seeds of health and wellness, The 2016 Eat. Learn. Live. and Grow Grant sponsored by Chartwells K12 in partnership with KidsGardening.org offers funding for schools seeking to enhance their curriculum and offer food and nutrition education through an edible garden program.

**Who is Eligible to Apply:** Any public or private school serving students in grades K to 12 and planning a new or expanding an established garden program is eligible to apply. The selection of winners will be based on demonstrated or potential program impact and sustainability in addition to how well the program connects to the theme "How Do You Eat, Learn, Live and Grow?"

**Due Date:** Applications must be submitted by **August 31, 2016**.

Please read through the entire application before you begin. This will help you avoid duplicating information and allow you to make the best use of the available space. We strongly advise saving the questions into a word document and copying and pasting your answers into the application.

Please note you may go back in and edit your document by clicking the "save and resume later" however once you select "submit" you will not be able to edit or access your application. You will receive a confirmation statement that the application was successfully received after you select submit. Please note, applications that are started, but not submitted, will **not** be considered for the award.

# **Contact Information**

1. Primary Contact:
2. Primary Contact Title:
3. School/Organization:
4. Email Address:
5. Phone:
6. Garden Program Name:
7. Location Name: Location of the garden by the official name of school, facility to receive the award (e.g. "Washington Elementary School," "Fairview Botanical Garden").
8. Shipping Address (no P.O boxes please): Please provide one physical address. Award package will ship to this address.
9. City:
10. State:
11. Zip:
12. Daytime Phone Number: Please list a phone number that corresponds with the shipping address.
13. Organization type: Public School Private School Charter School Other:
14. How many youth from each age group will participate directly in the garden program?  Elementary (Grades K-5)  Middle School/Junior High (Grades 6-8)  High School (Grades 9-12)

- 15. What percentage of direct participants are eligible for free/reduced cost lunch programs?
- 16. Who is your current school lunch provider?
- 17. Is your garden already established or are you just getting started?
  New/Start-up Garden
  Established Garden
- 18. How many hours per week on average will participating youth be involved in gardening activities?
- 19. How many months of the year will you be gardening?
- 20. If chosen as a winner for the 2016 Eat. Learn. Live and Grow Grant Program, I agree to complete a year end report survey including a program summary and at least 5 photos from our garden program.

Yes

No

## **Program Overview**

21. Provide a concise overview of your garden program. List the goals of your program, describe the youth who will participate and how they will be engaged in the garden, and share innovative aspects of your program. If you are proposing a new school garden program, detail the planning that has been done to date toward implementing your program. If you have an established garden program, please describe the benefits children have derived from their experiences. If you are a new program, please describe the benefits you hope to achieve. (limit 1000 words)

### **Volunteers and Leadership Team**

22. Does your garden program partner with or receive support from any of the following individuals or organizations (please check all that apply):

**Parents** 

PTA/PTO

Lunchroom/Cafeteria Staff

**School Administration** 

**Neighbors or Community Volunteers** 

**Master Gardeners** 

**Food Corp Volunteers** 

**Farmers** 

**Corporate Volunteers** 

Ag Business/Industry

Garden Clubs
Local Government Offices
Local Extension Office
Local College or University
Farm to School Program
Slow Foods Chapter
Other. Please list.

23. List the individuals on your program's leadership team and describe each leader's experience in gardening with kids and how they are involved in your program. Also, describe how your garden program recruits and utilizes volunteer help. (Limit 500 words)

### **Program Details**

24. How do you plan to use the harvest from your garden (check all that apply):

Students will take home

For cooking demonstrations and or sampling by students

Use in cafeteria/café

Sell as a fundraiser

Donate to the community

Other

25. **How does your garden help participants Eat. Learn. Live and Grow?** Describe what aspects of your garden program will focus on health and wellness education. How does your program support and encourage healthier lifestyles?

(limit 750 words)

26. Describe how your cafeteria/café will collaborate with your garden program. (limit 500 words)

#### **Garden Plans**

27. What type of garden beds do you have or plan to install:

in ground raised beds containers indoor grow lights other 28. What do you plan to grow in your garden beds:

vegetables

fruits

fruit trees

herbs

flowers

other

- 29. Describe the design, or planned design, of the garden that is established or that you intend to create. Include the size of the garden and the work that has been done to date to implement your plans. (Limit 750 words.)
- 30. How do you plan to sustain your program in the future (e.g., ensure ongoing maintenance and leadership; build partnerships; find sources and/or funds for plant materials, services, tools, etc.)? (limit 500 words)

## Budget.

31. Budget. Please provide a detailed account of how you will spend the money if you are awarded an Eat. Learn.Live. and Garden Grant. Provide a description of what you would purchase if you received a \$1,000 award or if you received a grand prize package of \$2,500 (for programs with an existing garden) or \$5,000 (for a program with a new garden).

#### **Attachments**

#### **Supporting Photos**

32. Please attach at least 2 photos to help us better understand your program, participants, and garden site.

#### Garden Map

33. Please attach a scanned map of your garden site or proposed garden site that includes location and dimensions of gardens and/or raised beds.

## 34. Letter of Support (optional but highly encouraged)

Please attach a letter of support demonstrating community involvement and interest in your garden program.