



Massachusetts Master Gardener Association

Horticultural Education Grant Application

The Education Grant is offered to non-profit organizations to develop and implement a horticultural education program or experience. We are specifically looking for groups who would like to provide hands on experiences in their communities that will offer both horticultural education and connect people to plants.

Grants will be awarded to groups that propose a well developed plan to provide horticultural education that promotes good cultural practices, environmental awareness and/or conservation, social responsibility, sustainable resource utilization and specific education goals. Programs should have a fully developed plan that includes an intended audience, measurable goals, a plan for implementation, evaluation & documentation of progress, as well as a step by step outline on how the project will be achieved.

All Massachusetts Master Gardener Association (MMGA) grants are for horticultural purposes only. Grants awarded are not intended for use as salary, administrative staff, utilities or fundraising. MMGA Grants are to be used within one year. Unused grant money is to be returned to the MMGA.

Please fill out this form entirely. All questions apply to all applicants. If you need help with the form please contact the grants committee at grants@massmastergardeners.org. Before filling out this application please be sure you have visited the **Grant Guidelines** page and that your organization is aware of the requirements of the grant.

Organization Information

Name of Organization:

Mailing Address (and Physical Address, if not the same):

Organization Phone:

Organization Website:

Organization Contact:

Mission Statement:

Project/Program Name:

Name and Title of Project/Program Manager:

Phone:

Email:

Is this an MMGA previously Approved Project?

MMGA Contact:

Detailed Description of Proposed Project/Program:

Please attach or link to any pertinent project information such as brochures or web pages that describe the goal and scope of the project.

Horticultural Consultant or Source:

If you do not currently have a horticultural consultant or source the MMGA may be able to assist in providing master gardeners to assist in this aspect of project development. Please indicate above if you wish to discuss this option. Grants will not awarded without a reputable consultant or source.

Is this a new or existing project? If already existing, for how long?

Is there a Committee or Board overseeing the Project/Program?

If yes, the MMGA will need to be in touch with this committee during the application process.

Community Served:

Is this project currently funded? If yes, how?

Project/Program Budget:

Grant Request Information

Specify Grant Amount Requested. Please provide bids, invoices, and any research or proposals related to cost of items or services included in grant request. Funds will not be granted for unsubstantiated costs.

How will this grant improve your ability to meet the project goal or objective?

Date the organization plans to implement the grant: (Date Grant Money will be Released

Plans to Support and Maintain this Project/Program outside of this Grant:

Financial Information

Tax Exemption Status:

EIN:

All information provided will be treated as confidential and will not be shared.

By signing below, I certify that both the organization involved and the applicant understands and attests to the following:

- 1. The information contained in this application is true and correct to the best of our/my knowledge.**
- 2. I approve this application in full.**
- 3. Part of the MMGA grant application process may include a scheduled site visit and will require contact with any overseeing board, committee or organization.**
- 4. Grant funds will be used as stated in this document.**
- 5. Both myself and the organization have reviewed and understand the [MMGA Grant guidelines](#), provided in a separate document.**
- 6. A project update must be submitted to the MMGA within six months of the release of grant funds.**

Project/Program Manager

Date

<u>Office Use:</u>	
Date Submitted:	Date Reviewed:
CMG Contact, if applicable:	Site Visit:
Approved By:	Determination Date: