



Grant Application

Due February 13, 2012

School Name:	
Project Coordinator:	
Telephone:	Fax:
E-mail:	
Goals of your edible school garden project (must be edible, specialty crops such as vegetables, herbs, spices, and fruits):	
Please describe your project in 100 words or less:	

School Resources

Is horticulture taught in the agricultural education curriculum?		
Yes	No	we have no agriculture education program
If yes, how many students are enrolled in horticulture related categories?		
Will you work with your school food service director/head cook to consider serving student grown produce in the school meals program?		
Yes		No
Is there a solid commitment from school faculty to integrate lesson plans with this program?		
Yes		No
If so, list the source of those plans (self-developed lessons, curriculum or lesson plans such as Ag in the Classroom, websites, NDSU Extension Service resources, National Gardening Association resources, etc.):		
List teachers that would participate:		
<u>Teacher(s)</u>	<u>Curriculum</u>	
What school financial resources, if any, could be dedicated to the project?		
Is there a solid commitment from school administration for this project?		
Yes		No
<i>Please provide the name and contact information of that person:</i>		

Community Resources

<p>Is there a good relationship between the school and community leaders?</p>	Yes	No
<p>List ways in which you currently cooperate with the community or would cooperate with this project:</p>		
<p>Would the city government support this project?</p>	Yes	No
<p>Do you have a farmers' market in your community?</p>	Yes	No
<p><i>If yes, would the farmers' market work closely with this project?</i></p>	Yes	No
<p>Are there businesses that may be concerned about potential competition because of this project?</p>	Yes	No
<p><i>List concerns here:</i></p>		
<p>Is there potential commitment or involvement of other groups such as fraternal, senior citizens, 4-H, Master Gardener's, and other groups to help support this project?</p>		
<p style="text-align: right;">Yes No</p> <p><i>If yes, list the groups and how they could assist with this project:</i></p>		

Does your community have organized health and nutrition groups?

Yes

No

If yes, list the groups and how they could assist with this project:

Would your county extension agent provide support to this project?

Yes

No

How will this project be sustained and/or expanded once the grant money is gone?

Budget

We are not asking you for a complete budget for this project, only how you would use the grant money if your application is accepted. (Maximum award \$500)

Expenditures	Est. Amount
Instructional materials (may include printing/copying)	
Seeds	
Transplants	
Ground Preparation	
Fertilizer/Soil Conditioners	
Herbicide	
Labor	
Equipment (hoses, fence, hoes, shovels, etc.)	
Utility Costs (lights, water, etc.)	
Miscellaneous Supplies	
Other: (Please list)	

Any additional comments you would like to make to support your application:

Please return completed application to:

Stacy Baldus

Entrepreneurial Center for Horticulture

Dakota College at Bottineau

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