

**Snohomish County Master Gardener Foundation  
COMMUNITY GARDEN GRANTS PROGRAM  
Request for Funding**

**Please print legibly. Initial each page.**

Date of Application: \_\_\_\_\_

Name of applicant organization or community group: \_\_\_\_\_

Name of contact person: \_\_\_\_\_

Address of contact person: \_\_\_\_\_

Telephone # of contact person: \_\_\_\_\_

Email of contact person: \_\_\_\_\_

Snohomish County Master Gardener associated with the project: \_\_\_\_\_

Title of the project: \_\_\_\_\_

Type of project funding: New Garden \_\_\_\_\_ Existing garden: \_\_\_\_\_

Previous Grant Award from SCMGF: YES \_\_\_\_\_ If yes, when? \_\_\_\_\_

NO \_\_\_\_\_

Collaborating partners/organizations: \_\_\_\_\_

Total cost of the project (include a detailed budget showing matching partner contributions, both direct and indirect): \_\_\_\_\_

Amount of this funding request: \_\_\_\_\_

Funds needed by (date): \_\_\_\_\_

Time frame in which the funds will be used: (from) \_\_\_\_\_ (to) \_\_\_\_\_

**SCMGF Community Garden Program Request for Funding Application Form**  
**Answer the following questions. Limit the total response to between two to five pages.**  
**Please print legibly. Initial each page.**

1. What is the purpose of the project?
2. What needs will the project fill and how will it fulfill them?
3. Whom will the project serve? How many will it serve?
4. Where will the project be located? What geographic area will it serve?
5. Who will be involved in the project (organizations, people, volunteers etc.)?
6. Who will lead the project?
7. How will the project be organized?
8. What is the timeline of the project?
9. What materials will be required and how will they be obtained?
10. How will the requested funding be utilized? (This should be reflected in the attached budget).
11. What other potential and actual sources of support are available for this project? (This should be reflected in the attached budget).
12. How will the success of the project be monitored and measured? (Receipts, cancelled checks or other documentation of materials purchased with grant funds must be submitted by end of grant period).
13. How will the project be maintained and supported in the future?
14. What other information do you wish to include as part of this request?

**ATTACH the following documentation:**

1. A drawing or schematic site plan for the garden (required).

2. Letter(s) or other documentation showing collaboration and/or support from other agencies or groups involved in the project (if available).
3. Detailed budget.

SCMGF requests that you provide us with a 'results' report at the end of your project with attached documentation of expenses related to grant funding. This report does not need to be more than two pages. Photographs or other attachments are welcome.

**SUBMIT REQUEST for FUNDING with documentation by mail to: SCMGF Community Garden Grants, 600 128<sup>th</sup> St SE Everett, WA 98208.**