



Hendricks County Master Gardeners New Project Approval Form



Date: _____

Project Name _____

Address or nearest intersection _____

HCMG Chairperson(s): _____

Phone: _____ Email _____

Phone: _____ Email _____

Contact Name: _____

Corporation/Organization: _____

Phone: _____ Email: _____

Contact Signature or attached letter: _____

Type of garden/project: _____

Is this a new project or an established project? _____

Will the requesting organization allow an HCMGA sign to be placed on this property? _____

Beneficiaries (children, seniors, public, etc.) _____

Estimate length of HCGMA involvement: _____

Approximate number of members needed _____ per week: _____ per year: _____

Approximate number of hours needed _____ per week: _____ per year: _____

Project and educational goals may be typed and attached to this form.

Project goals for the year _____

Educational goals and activities _____

Response needed by _____

Equipment needed to establish garden (tiller, hose, etc.)	HCMG	Requesting Organization
_____	_____	_____
_____	_____	_____

Location of water source _____

Supplies needed (indicate dollar amount or donated)	HCMG	Requesting Organization
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Expenses \$ _____

HCMGA Budget Request \$ _____

At termination of this project all supplies provided by HCMG will be returned to HCMG

What are unusual problems or situations about this project? _____

Signature Contact Person _____

Signature MG Chair _____
 (see project update requirements below)

..... Do not write below this line

Board of Directors Notes/Comments: _____

Budget amount approved \$ _____ Date _____

_____ President	_____ Project Coordinator
_____ Vice President	_____ Purdue Extension Educator/Advisor
_____ Secretary	
_____ Treasurer	
_____ Journalist	

- Distribution of copies of approved form:
1. Requesting organization contact person _____
 2. Project Chair _____
 3. Project Coordinator _____
 4. Purdue ANR Educator _____

- Project update to be sent by project chairman to project coordinator:
1. 3 months _____
 2. 6 months _____
 3. 12 months _____
 4. Annually _____
- Updates dependent on project advancement