

La Porte County Master Gardener Association

Community Grant

The La Porte County Master Gardeners Association (LPCMGA) is offering community grants to be used for materials (not labor) for a gardening/horticultural-related **volunteer project**.

Awards will not exceed \$500 each. The number of grants will be up to the LPCMGA and will be based upon monies available and eligible grant applications received. All requests for community grants must be made in writing on the Community Grant Application form below.

Individuals or groups within La Porte County are eligible to apply for a grant. This includes, but is not limited to, public and private school teachers, Sunday School teachers, Boys and Girls Club Leaders, 4-H Clubs, community organizations, and volunteer individuals. However, we do not fund Homeowners Association (HOA) projects or individual privately owned property.

Only one application may be submitted per project. A total of two projects per organization may be submitted for consideration.

The application form is to be completed in its entirety. Typing is preferred but not required; however, if writing is illegible, the application will not be considered. Please use black ink. The essay questions may be answered on a separate sheet of paper that is attached to the application. The applicant must write his/her name in the upper right corner of any attached page.

Applications must be **postmarked no later than April 30th, 2024. Hand delivered documents will not be accepted.** Money will be available to grant winners by May 31st of that year. In the event that funds are unavailable or there is no qualified applicant, the LPCMGA will not award a community grant for that year.

Any grant recipient must be willing to allow the LPCMGA to publicize the grant award in local media outlets as well as in Master Gardener publications.

All receipts of purchases for said project must be turned over to LPCMGA during the October 3, 2024 LPCMGA membership meeting. The applicant must be willing to give a presentation of the project at that time.

Decisions of the LPCMGA are final.

The La Porte County Extension Master Gardeners Association is non-profit and organized exclusively for charitable, education and scientific purposes. The mission of the Association is to fulfill the Purdue University Extension Master Gardener Program's aim of **"Helping Others Grow"** by offering volunteer opportunities to promote good gardening and horticulture practices through **educational activities** and the demonstration of those practices in cooperation with the La Porte County Extension Office, Purdue University and the Purdue University Extension Master Gardener Program.



PURDUE EXTENSION
MASTER GARDENER PROGRAM

2024

\$500 Community Grant Application

La Porte County Master Gardener Association (LPCMGA)
Purdue University Cooperative Extension Service,
La Porte County
2857 W State Road 2, Suite A, La Porte, IN 46350
Phone: (219) 324-9407 Fax : (219) 326-7362
www.lpmastergardener.org

Applications must be postmarked no later than April 30th, 2024.
(Please print clearly in black ink)

Name of applicant (contact person) _____

Name of volunteer project _____

Name or organization involved (if any) _____

Address _____

City _____ State Indiana Zip Code _____

Telephone _____ Cell Phone _____

Email _____

Please describe in detail the project you are proposing.

Be sure to include who will benefit from the project described.

Include How this project furthers our mission to "Help Others Grow".

Please describe in detail, the Educational aspect of this project.

You may attach additional sheets as needed.

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Please provide a list of materials and costs of materials needed for the project. Attach additional sheets if necessary. Receipts must be provided at the time of presentation if grant is awarded.

What is the total estimated cost of this project? _____

How much money are you requesting from the LPCMGA? _____

Do you have other funding to complete this project? If yes, what is the source of this funding?

Will this project be completed in 2024? _____ If not, when will it be completed? _____

Who will be responsible for maintenance of this project once it is completed? (Name and contact number if applicable).

I certify that all information on this form is true and factual. I agree that the LPCMGA may use this information and other information provided by me in connection with this program for purposes of news and publicity in all media, including but not limited to print and electronic media, internet websites, and CD-ROM's. If I receive a grant from the LPCMGA, I will supply a poster of my project for the LPCMGA to display at future events as well as original receipts.

Signature of applicant _____ Date _____

