**2023 GroMoreGood Grassroots Grant Application**

**Please note: Do not submit this document to KidsGardening.** Instead, it is to help programs prepare your application responses ahead of time before you complete the online application. Simply copy and paste your answers from this document into the online form.

For full details, eligibility information, and the link to the online form, visit our website at <https://kidsgardening.org/grant-opportunities/gromoregood-grassroots-grant-23>.

**Eligibility Questions**

* Is your organization tax-exempt?
  + Yes
  + No
* Did your organization receive a 2021 or 2022 GroMoreGood Grassroots Grant?
  + Yes
  + No
* Will fifteen or more youth participate in your garden program?
  + Yes
  + No
* If chosen as a winner, will your organization use the funds and implement programming by December 2023? *Award funds will be distributed in late March 2023.*
  + Yes
  + No
* If chosen as a winner, do you agree to submit a year-end report by December 2023, with a project summary, photos, and parental photo release forms for any recognizable youth featured in images?
  + Yes
  + No

*For details on eligibility, please review our grant landing page.*

**Contact Information**

* Grant Applicant First Name:
* Grant Applicant Last Name:
* Grant Applicant Job Title:
* Grant Applicant Email Address:
* Confirm Grant Application Email Address:
* Grant Applicant Phone Number:
* Organization Name:
* Organization Tax ID #:

Note: *All organizations must have a 501(c)(3) status or be otherwise tax-exempt in order to be considered for support. If you are a school group that does not have 501(c)(3) status, please enter your district's EIN number.*

* Garden Program Name:
* Location Name:

*Note: Location of the garden by the official name of the school or facility to receive the award (e.g. "Washington Elementary School," "Fairview Botanical Garden"):*

* Address:
* City:
* State or Territory:
* Zip Code:

**Program Background Information**

* Has your program applied for a GroMoreGood Grassroots Grant before?
  + Yes
  + No
  + Unknown
* Has your program received a grant from KidsGardening before?
  + Yes
  + No
  + Unknown
* If yes, your program has received a grant from KidsGardening, what grant(s) and what year(s)?
* Which of the following best describes your organization?
  + Public School
  + Private School
  + Charter School
  + Nonprofit Agency
  + Community Garden
  + Preschool
  + Head Start
  + Child Care/Day Care
  + Garden Club
  + Summer Camp
  + YMCA
  + Boys and Girls Club
  + Boys Scouts or Girl Scouts
  + Other: \_\_\_\_\_\_\_\_\_\_\_\_
* How many youth from each age group will participate directly in the garden program? Enter “0” if you do not anticipate any youth in the age category. *Note: The number of youth must be equal to or greater than 15 to be eligible. Applicants should be prepared to provide supporting documentation if requested.*
  + Ages 0 - 4 (Preschool)
  + Ages 5-10 (Elementary School)
  + Ages 11-13 (Middle/Junior High School)
  + Ages 14-18 (High School)
  + Other: \_\_\_\_\_\_\_\_\_\_\_\_
* What are the identities of the youth in your program? Indicate approximately using a percentage.
  + Children of Migrant Worker Families %
  + Children of Refugee Families %
  + Children of Undocumented Families %
  + Youth who Speak Multiple Languages %
  + Justice-involved Youth %
  + LGBTQ+ Youth %
  + Native American, Hawaiian, or Indigenous Youth %
  + Youth of Color %
  + Youth Experiencing Homelessness %
  + Youth in Foster Care %
  + Youth with Disabilities %
  + N/A
* Do the youth who participate directly in the garden program experience food insecurity? Indicate approximately using a percentage.
  + School’s Free/Reduced Cost Lunch %
  + Youth from Low Income or Economically Disadvantaged Families %
* What needs and challenges does your community have? These should be outside of any garden needs and may include but are not limited to financial, and environmental issues, safety concerns, health challenges, community support, or regulatory hurdles. (100-250 words)

**Garden Program Description**

1. Will you start a new garden or improve an existing garden?

* New Garden
* Existing Garden
  1. If you have an existing garden, please describe your current garden space, such as dimensions of garden beds, garden features, walkways, learning spaces, accessibility, etc. (100-250 words)

1. How many months of the year will youth be involved in your garden program (planning, activities, classes, meetings, programming, etc.)?
2. What are your garden program’s mission and educational goals? (100-250 words)
3. How will youth participate in the garden? How often will they visit, and in what format (club, class, etc.)? (50-100 words)
4. How do you plan to create your new garden or improve your existing garden? Please provide details about your plans and the layout of the garden, such as dimensions of garden beds, garden features, walkways, learning spaces, accessibility, etc. (100-250 words)
5. What plants will you grow? (50-100 words)
6. Is your project enrolled in the Bonnie’s Plants 3rd Grade Cabbage Program?
   1. Yes
   2. No
7. What is the approximate size of your planned garden space or garden space that will be improved in square feet?
8. Indicate approximately what percentage of your planned garden space or total garden will be used for the following types of gardening.
   1. Edible %
   2. Pollinator %
   3. Native plant %
   4. Other greenspace %
   5. Other. Please list:
9. If this program includes an edible garden, how will the harvested garden produce be used? Indicate approximately, using a percentage.
   1. Garden program activities %
   2. Given to participants to take home %
   3. Donated to a school meal program %
   4. Donated to a local food agency %
   5. N/A
   6. Other. Please list:
10. What is the most significant benefit you hope to achieve with your garden project?
    1. Develop a natural garden habitat for pollinators
    2. Begin or contribute to a neighborhood revitalization or beautification movement
    3. Provide therapeutic benefits to individuals through gardening
    4. Create an edible garden that produces healthy food for students or community members in need
    5. Provide children with educational opportunities in a garden or greenspace
    6. Engage children in outdoor nature-based play spaces/activities
    7. Other. Please list:
11. How will you use the grant funds? Please provide an itemized budget of how you will utilize the $500 funding. If your project requires more funding, how will you secure the additional funds? (50-100 words)
12. What funding and/or grants has your garden program received within the last two years? List the amount and year the funding was received. (50-100 words)
13. Who is on your garden program’s leadership team? List the individuals and the experience (i.e, lived experience, professional, horticultural, etc.) each leader contributes to your garden program. (100-250 words)
14. How does the community support your garden program (e.g. volunteers, donations, partnerships, etc.)? (100-250 words)
15. What is the maintenance plan for your garden? How will you maintain the garden in the fall, winter, spring, and summer? (100-250 words)
16. How will you continue to keep your garden program going over time? (100-250 words)
17. Are you interested in being considered for a specialty award?

* Yes, the Plus Specialty Award
* Yes, the Pride Specialty Award
* Yes, the Equity Specialty Award
* No
  1. If yes, the Plus Specialty Award:
     1. Does your community face significant financial, environmental, safety, health, regulation, and/or other needs and challenges?
        1. Yes
        2. No
     2. What significant needs, gaps, or challenges has your community experienced? (100-250 words)
     3. How will your organization use your garden program to respond to the needs, gaps, or challenges faced by participating youth? (100-250 words)
     4. How will the $1,000 Plus Specialty Award funding be used? (100-250 words)
  2. If yes, the Pride Specialty Award:
     1. Do you currently engage with LGBTQ+ youth in your community?
        1. Yes
        2. No
     2. How does, or will, your organization engage with the LGBTQ+ youth community? (100-250 words)
     3. How will your organization use your garden program to support LGBTQ+ youth? (100-250 words)
     4. How will the $1,000 Pride Specialty Award funding be used? (100-250 words)
  3. If yes, the Equity Specialty Award:
     1. Does the leader of your youth garden program identify as a person of color? (i.e. African American or Black; Asian or Asian American; Hispanic, Latine/LatinX, or Spanish Origin; Middle Eastern or North African; Native American or Alaska Native; and/or Native Hawaiian or Pacific Islander; etc.)
        1. Yes
        2. No
     2. How is the leader reflective of the community they serve? (100 - 250 words)
     3. How will your organization use your garden program to support youth of color? (100-250 words)
     4. How will the $1,000 Equity Specialty Award funding be used? (100-250 words)

**Attachments**

* **Verification Document (Required).** Please attach the following document verifying your organization’s tax-exempt status.For 501(c)(3) Organizations: IRS Determination Letter or Formation Document or Organization's Charter. For Schools: A letter on school district letterhead, signed by a school district official, stating that the school in question falls under the jurisdiction of the school district, a governmental entity. For Other Tax-Exempt Organizations: For other tax-exempt organizations such as government agencies, religious organizations, and Tribal governments, please provide a letter on official letterhead stating that you are designated as an automatically tax-exempt organization and thus exempt from needing a 501(c)(3) documentation to claim nonprofit status with the US government.
* **Photos (Required).** Please attach 2-5 photos to help us understand your garden site and the garden program. If you have trouble uploading photos, you may email them to grants@kidsgardening.org.
* **Map (Optional).** Please attach a map of your garden site that includes dimensions.
* **Letter of Support (Optional).** Please attach a one-page letter of support for your program written by someone other than the main contact. This letter can be written by an administrator, parent, or community volunteer demonstrating their support of and appreciation for your program.

**Grant Conditions:** By selecting "Agree" below, the organization agrees to the following grant conditions:

* To use the funds only for the designated purpose as described in the grant application and subsequent grant notification letter and not for any other purpose without prior written approval.
* To notify KidsGardening immediately of any change in (a) Organization's legal or tax status, (b) Organization's executive or key staff responsible for achieving the grant purposes, (c) Organization's ability to expend the grant for the intended purpose, and (d) any expenditure from this grant for any purpose other than those for which the grant was intended.
* To maintain books and records adequate to demonstrate that it maintained the grant funds dedicated to the purpose for which the grant is made, and to maintain records of expenditures adequate to identify the purpose for which, and how, grant funds have been expended.
* To give KidsGardening reasonable access to the grantee's files and records to make such financial audits, verifications, and investigations as it deems necessary concerning the grant, and to maintain such files and records for at least four years after completion or termination of the project.
* To not expend any grant funds for any political or lobbying activity or any purpose other than one specified in section 170 (c)(2)(b) of the Code.
* To return any unexpended funds or any portion of the grant that is not used for the purposes specified herein.
* To allow the Scotts Miracle-Gro Foundation and KidsGardening to include information about this grant in periodic public reports, newsletters, news releases, social media postings, and websites. This includes the amount and purpose of the grant, any photographs you have provided, your logo or trademark, and other information and materials about your organization and its activities.
* To complete a year-end report summarizing the project promptly following the end of the period during which you are to use all grant funds. Your reports should describe your progress in achieving the purposes of the grant and include a detailed accounting of the use and expenditure of the grant funds.
* To cooperate fully with KidsGardening to assure that they can satisfy all of the requirements of an "expenditure responsibility" grant following the terms of the Internal Revenue Code and the regulations thereunder.

The Foundation and KidsGardening reserve the right to discontinue, modify or withhold any payments under this grant award or to require a total or partial refund of any grant funds if, in KidsGardening's sole discretion, such action is necessary: (a) because you have not fully complied with the terms and conditions of this grant; (b) to protect the purpose and objectives of the grant or any other charitable activities of the Foundation or KidsGardening; or (c) to comply with the requirements of any law or regulations applicable to you, to KidsGardening, to the Foundation, or this grant.

**Grant Applicant Demographic Information (Optional)**

We are collecting demographic information as part of an effort to ensure our grant application process is equitable. **Answers will not play a role in the grant application evaluation nor influence winner selection.**

* I identify as… (Select all that apply)
  + African American or Black
  + Asian or Asian American
  + Hispanic, Latine/LatinX, or Spanish Origin
  + Middle Eastern or North African
  + Native American or Alaska Native
  + Native Hawaiian or Pacific Islander
  + White
  + Not listed here or prefer to self-describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + Prefer not to answer