

2026 Growing the Future Intergenerational Garden Grant

Please note: Do not submit this document to KidsGardening. Please use this document to help your organization prepare your responses ahead of time before starting 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/intergenerational-garden-grant/>.

PAGE 1: Overview

The deadline for application submission is May 15, 2026, at 11:59 PM PT.

Grantees will be announced and contacted by email in July. A list of grantees will also be posted on KidsGardening.org/grant-winners. Award funds will be distributed in late July.

Questions? Refer to the Frequently Asked Questions section on the grant landing page.

Please contact KidsGardening Grant Program Director Sarah Lane at grants@kidsgardening.org with any additional questions.

All applicants will be added to KidsGardening's mailing list.

PAGE 2: Eligibility Quiz

Is your organization tax-exempt, or are you partnering with a fiscal sponsor that has achieved tax-exempt status? Organizations must be based in the United States or U.S. Territories.

- Tax-exempt (ex: schools, nonprofits, etc.) or partnering with a fiscal sponsor that has achieved tax-exempt status
- Not tax-exempt

Do you plan to use the garden to intentionally bring youth (0-18) and older adults (55+) together through shared gardening experiences?

- Yes
- No

If chosen as a grantee, will your organization be able to use all of the funds and implement programming by December 2026?

- Yes
- No

If chosen as a grantee, do you agree to submit a quick photo or video update on the garden program by September 15, 2026?

- Yes

- No

If chosen as a grantee, do you agree to submit a short year-end report by December 15, 2026?

- Yes
- No

What type of community is the garden located in?

- Urban
- Suburban
- Rural

How much total grant funding did your organization receive specifically for your garden program in 2026 so far? Applicants should be prepared to provide supporting documentation if requested.

- \$0
- \$1 - \$999
- \$1,000 - \$4,999
- \$5,000 - \$9,999
- \$10,000+

List the funding organization, amount, and what the funding was used for. Write N/A if no funding. (150 words maximum)

How many people from each age group do you estimate will participate directly in the garden program? Applicants should be prepared to provide supporting documentation if requested.

Note: Every cell must be filled in.

	Number of Direct Participants
Ages 0-4 (Preschool)	
Ages 5-10 (Elementary)	
Ages 11-13 (Middle/Junior High)	
Ages 14-18 (High)	
Adults 18 - 54	
Adults 55+	

What are the identities of the people in your program? Applicants should be prepared to provide supporting documentation if requested. Note: Every row must have an answer.

	0-24%	25-49%	50-89%	90-100%

African American or Black %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asian or Asian American %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hispanic, Latine/LatinX, or Spanish Origin %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Middle Eastern or North African %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Native American or Alaska Native %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Native Hawaiian or Pacific Islander %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Biracial or Multiracial %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Migrant Worker Families %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refugee Families %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Undocumented Families %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who Speak Multiple Languages %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in the Justice System %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People with Incarcerated Family Members %	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LGBTQ+ People %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People Experiencing Homelessness %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth in Foster Care %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People with Disabilities %	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What percentage of the people who will participate directly in the garden program experience food insecurity? Select the type of data you would like to provide.

- Census, Persons in Poverty %
- School's Free/Reduced Cost Lunch %

If Census, Persons in Poverty % - Navigate to <https://data.census.gov/> and type into the search bar "poverty rate in [your zip code]" to find the %.

	0-9%	10-20%	21+%
Census, Persons in Poverty %			

If you are a school, what is your Free/Reduced Cost lunch rate? If you are an organization, what is a nearby school's rate? Applicants should be prepared to provide supporting documentation if requested.

	0-39%	40-64%	65-100%
School's Free/Reduced Cost Lunch %			

Eligibility Results

Depending on your answers, the following messages might show:

- Based on your answers, you are not eligible for the 2026 Growing the Future Intergenerational Garden Grant. For details on eligibility, please review our grant landing page.
- Thank you for taking the time to fill out the eligibility survey. Based on your responses, your program only partially aligns with our funding priorities. You are eligible to apply; however, programs with higher demonstrated need will align more closely with our funding priorities and therefore are more likely to be funded. For details on our funding priorities, including how we measure need, please review our grant landing page.

PAGE 3: Organization Information

- Grant Applicant First Name:
- Grant Applicant Last Name:
- Grant Applicant Job Title:
- Grant Applicant Email Address:
- Confirm Grant Application Email Address:
- Email Communication: I understand that by applying for the grant opportunity, my email will be shared with KidsGardening for communication about this grant and other related opportunities.
- Grant Applicant Phone Number:
- Organization Type
 - Public School
 - Private School
 - Charter School
 - Nonprofit Agency
 - Community Garden
 - Preschool
 - Head Start
 - Child Care/Day Care
 - Garden Club
 - Summer Camp
 - YMCA

- Library
- Boys & Girls Club
- Cub Scouts, Scouts BSA, Venturing, or Sea Scouts
- Kiwanis Club
- Juvenile Justice System (detention, correction, court, etc.)
- Other: _____
- Organization Name:
- Upload: Verification Document. Attach a document verifying your organization's tax-exempt status or provide a link below. **EIN letters, W-9s, and state sales tax certificates are not accepted.**
 - 501(c)(3) organizations - Submit your IRS Determination Letter.
 - Schools - Submit a letter on school district letterhead, signed by a school district official, stating that the school in question falls under the school district's jurisdiction.
 - For other tax-exempt organizations, such as universities and religious organizations - 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. You may also submit an IRS Determination Letter if available.
 - Fiscal Sponsorship - Submit your sponsor's IRS Determination Letter and a signed contract detailing the fiscal sponsorship relationship between your organizations.
- Upload
- Link
- Organization Tax ID #:
- Organization Address:
- Has your organization applied for and/or received a grant from KidsGardening before?
 - Yes, applied and received a grant
 - If yes, what grant(s) and what year(s)?
 - Yes, applied but did not receive a grant
 - No
 - Other: _____
- What needs, gaps, and/or challenges does your community experience? (150 words maximum)

PAGE 4: Garden Information

- Garden Program Name:
- Is this a new garden or an existing garden?
 - New Garden (first growing space on property)

- Existing Garden
 - If you have an existing garden, please describe your current garden, such as dimensions of garden beds, garden features, walkways, learning spaces, accessibility, etc. (150 words maximum).
- Upload: Photos (Required). Attach 3-5 up-to-date photos of the garden site or provide a link to the files below.
 - Upload
 - Link
- How many months of the year will the garden be used (activities, classes, meetings, programming, etc.)? (Number)
- What are your garden program's mission and educational goals? (150 words maximum)
- What are your plans to create a new garden or improve the existing garden? (150 words maximum)
- How will youth and seniors participate together in the garden, and how often? (150 words maximum)
- How will you spend the \$500 grant funds and use the \$250 Miracle-Gro product coupon? Provide an itemized budget. (250 words maximum)
- Does your project require more funding than these grant funds?
 - Yes
 - If your project requires more funding, how much more do you need, and how will you secure the additional funds? (150 words maximum)
 - No
- Who is on your garden program's leadership team? List their names, garden roles, and related experiences.

	Name	Garden Role	Related Experience
Leader 1			
Leader 2, if applicable			
Leader 3, if applicable			
Leader 4, if applicable			
Leader 5, if applicable			

- How will the community support your garden? List the names of the specific people and organizations.

	Type (Person or Org)	Name	Support Provided

Community Partner 1			
Community Partner 2, if applicable			
Community Partner 3, if applicable			
Community Partner 4, if applicable			
Community Partner 5, if applicable			

- What is your plan to care for the garden year-round and during breaks? (150 words maximum)
- How will you sustain the garden year-over-year financially and as the garden program's leadership changes? (150 words maximum)

PAGE 5: Optional Attachments

- Garden Sketch, Land Survey, or Scale Map (Optional). Please attach a garden sketch, land survey, or scale map of the space. If you do not currently have this information, search for the address of your lot on Google Earth or Google Maps, or request the digital land records or parcel map information from your city.
 - Upload
 - Link
- Video (Optional). Attach a video or provide a link to the file below, quickly showing the garden(1-minute maximum).
 - Upload
 - Link
- Letters of Support (Optional). Attach a one-page letter of support for your project written by a community partner or another organization involved in the project demonstrating their support for your organization.
 - Upload
 - Link

PAGE 6: 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... (Optional, Select one)

- African American or Black

- Native American, Indigenous, or Alaska Native
- Asian or Asian American
- Hispanic, Latine/LatinX, or Spanish Origin
- Middle Eastern or North African
- Native Hawaiian or Pacific Islander
- Biracial or Multi-racial
- White

If biracial or multi-racial, would you like to elaborate? (Select all)

- 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
- Other: _____