



## AMGA APPLICATION: Project Funding Program

1. NAME and ADDRESS of AMGA Association submitting application:

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2. Name/Title of Project:

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3. Location of Project: ADDRESS:

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CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

4. Amount of funding requested (provide detailed cost proposal, attachments may be included):

5. Describe your project in detail, addressing the goals to be achieved (attachments may be included)

6. How many volunteers will be used? \_\_\_\_\_

Describe volunteers' involvement, specifically, Master Gardener participation:

7. Have other sources of funding been received for this project or will they be required? \_\_ Y  
\_\_ N

If yes, please provide details:

8. Who will be responsible for the design and implementation of the project?

9. Who will be the contact person for the project?

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

City: \_\_\_\_\_ STATE \_\_\_\_\_ ZIPCODE \_\_\_\_\_

PHONE: CELL \_\_\_\_\_ HOME \_\_\_\_\_

EMAIL: \_\_\_\_\_

10. If required, how will you address long term maintenance?

11. Please list any special considerations you would like to have evaluated with this application.

12. The signed and dated President's Letter must accompany the completed application.

**PROJECT STATUS REPORT**  
**INCLUDING ELECTRONICS**

Please complete this form regarding the project for which you received funding from the Alabama Master Gardener Association in 20\_\_\_\_. This information is necessary for keeping our 501(c)(3) status if we are audited.

\*Name of MG association \_\_\_\_\_

\*Name of Project \_\_\_\_\_

\*Amount of Funding received from AMGA: \$ \_\_\_\_\_

Type of organization receiving the project (school, city, park etc.) \_\_\_\_\_

Specific objective of project \_\_\_\_\_

Progress made by end year one \_\_\_\_\_

Who will maintain project after completion (i.e., Master Gardeners, high school students, etc.)

\_\_\_\_\_

How many Master Gardeners participated in this project? \_\_\_\_\_

How does your project benefit the community? \_\_\_\_\_

\_\_\_\_\_

How did you promote the educational aspects of this project? \_\_\_\_\_

What publicity or recognition has your project received? \_\_\_\_\_

\_\_\_\_\_

**ELECTRONICS**

If your association received a Project Funding grant for electronics, how will they be used?  
\_\_\_\_\_

How will your electronics benefit your community? \_\_\_\_\_

\_\_\_\_\_

Other comments regarding your project or electronics \_\_\_\_\_

\_\_\_\_\_

\* Must be completed on all Status Reports. Include receipts for all purchases, original or copies.