

GARDEN CLUB APPLICATION
for Project Support

Please fill in completely, and submit at least six weeks prior to start of the project to **THE GARDEN CLUB of HARVARD, PO Box 105, Harvard MA 01451.**

CONTACT PERSON :

TITLE:

ORGANIZATION:

EMAIL:

TELEPHONE:

CATEGORY FOR WHICH YOU ARE APPLYING:

EDUCATIONAL GRANT

SCIENCE FAIR

PROFESSIONAL DEVELOPMENT

LIBRARY

CIVIC BEAUTIFICATION Fund-Raising

OTHER (identify) _____

WHAT ARE YOU REQUESTING

Assistance Materials Financial - how much? _____

BRIEF OVERVIEW OF YOUR PROJECT

Project Goal

Anticipated Benefits

Project Tasks

Project Costs

Timeline for the project:

START DATE _____

COMPLETION TARGET _____

KEY INTERIM

MILESTONES: _____

List those involved in your project and their roles. (Names not needed if it is the whole biology class, for instance, but the leaders should be specified.)

Have you received Garden Club support in the past? If so, when and for what purpose?

Please list other sponsors for this project, and their roles:

Other sources of support for this project:

If you are under 18, who is your sponsor?

Name _____ Role _____

Please note: A final report about the use of what has been granted should be sent within 30 days of completion.

If you have any questions, please email _____

