

**Wood County Master Gardener  
Annual Funding Proposal Form**

*(To accompany Project Approval Form.)*

**MUST BE SUBMITTED BY DECEMBER 1ST**

*Before completing this form, please read WCMG Standard Practice I and II.*

**Project Name & Location**

**Date:** \_\_\_\_\_

**Project Leader/s:**

**Estimated overall project cost:** \_\_\_\_\_ *(List horticultural materials only. See WCMG Standard Practice II.)*

**Estimated duration of funding requirements:** \_\_\_\_\_ **Multi-year** \_\_\_\_\_ **One year** (This form must be completed every year for multi-year projects)

**MG Funds requested:**

**Additional funding source/s:**

- 1.
- 2.
- 3.

**Signatures:** \_\_\_\_\_  
*(Project Team Leader/s)*

**Client Contact:** \_\_\_\_\_  
*(Client Signature/s as available)*



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*(Attach any plans and/or drawings or additional documentation if appropriate.)*

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**Project Name & Location**

**Date:** \_\_\_\_\_

**Project Leader/s and Team Members**

**Project Description:**

**Project Goals and Client Expectations:** *(Please describe the overall project goals and project purpose.)*

**Project Maintenance:** *(Describe the required maintenance and responsible party.)*

**Are you able to accommodate Intern Master Gardeners? \_\_\_\_\_Yes \_\_\_\_\_No**

**If yes: How many? \_\_\_\_\_** (Number of hours available? \_\_\_\_\_ or endless)

**What days of the week do you (or another certified Master Gardener Volunteer) work on the project?**

**What hours of the day do you (or another Master Gardener Volunteer) usually work on the project?**

**Are there any special requirements for the volunteers on this project (ie. specific tools, ability to carry water, lovely singing voice, etc.)?**

**Signatures:** \_\_\_\_\_  
*(Project Team Leader/s)*

**Client Contact:** \_\_\_\_\_  
*(Client Signature/s as available)*

**Wood County Master Gardeners  
Annual Project Evaluation Form**  
(form to be submitted with Project Forms #101 and #102)

(please include photos if available)

Project Name \_\_\_\_\_ Date \_\_\_\_\_

Project Leader and Team members:

Were the project goals achieved? \_\_\_\_\_ Please explain.

Did your project goals change along the way? No \_\_\_\_\_ Yes \_\_\_\_\_ (Explain)

What were the Client Expectations?

Did the project meet Client Expectations? Yes \_\_\_\_\_ No \_\_\_\_\_ Please explain.

How much public exposure does this project receive?

What is the community impact or educational value of the project?

Did you receive public feedback?

If you could start over, what would you do differently?

Client \_\_\_\_\_