DIVISION OF AGRICULTURE
RESEARCH & EXTENSION
University of Arkansas System

MASTER GARDENER

SANCTIONED PROJECT PROPOSAL REQUEST

Washington County Master Gardeners

Requesting Agency Name _____
Address _____
Phone Number _____
Contact Person Name _____

Title of Proposed Project _____
Proposed Project meets Sanctioned Project Criteria Yes _____ No _____
Description of Project

_____
_____
_____

Is this a one-time project? Yes _____ Is this a continuing project? Yes _____
Approximate date(s) for volunteers to work _____
Number of volunteers needed _____
Names of volunteers committed to project _____ _____ _____
_____ _____ _____ _____

Requesting agency agrees to provide adequate watering, trimming, and mowing.
How will this project be funded? _____
_____
_____

Submitted by: Name _____ Address _____
Phone _____ E-mail _____

. . . . . ***Office use only*** . . . . . .

Project Proposal Submission Date _____
WCMG Chairperson Acceptance Date _____
WCMG Executive Committee Acceptance Date _____
County Extension Agent Approval Date _____

If not accepted, please state reason(s) _____
_____

If accepted, fill out the **PROJECT AGREEMENT FORM** with the Site Manager and return to the Project Review Committee through the Cooperative Extension Office.

Submit your request to: U of A Cooperative Extension Office
ATTN: WCMG Project Proposal Review Committee
2536 N. McConnell, Fayetteville, AR 72704
(Or call 479-444-1755 for information)

SANCTIONED PROJECT AGREEMENT

Washington County Master Gardeners

Purpose: The **Project Proposal and Site Manager Contract** form is intended to provide a guideline with which the Master Gardeners can reach agreement and document the project with a prospective recipient of our services. Upon completion all parties have the same expectations at project completion and a common understanding of respective responsibilities.

Project Tasks and Responsibilities (Check Appropriate Box):

Task	Master Gardeners	Project Site Manager	Comments
Garden Design & Planning			
Water Source (irrigation, hose, etc.		Required	
Irrigation System Design			
Irrigation System Install			
Plant Selection			
Planting			
Application of Mulch			
*Include site pictures, drawings, and plant lists as attachments			

Ongoing Maintenance Responsibilities (Check Appropriate Box):

Task	Master Gardeners	Project Site Manager	Comments
Periodic irrigation			
Routine weeding, etc.			
Planting, replanting, plant division			
Periodic mulching			
Periodic plant feeding			

Project Cost Estimate:

Task	Master Gardeners	Project Site Manager	Comments
Irrigation System			
Plant Materials			
Soil Amendments			
Mulch			
Fertilizer			

Funding Source:

Source	Amount	Comment: How will funds be dispersed?
Total		

Washington County Master Gardener Commitment:

Number of Gardeners _____ Estimated Total Hours _____

Comments:

Names of committed volunteers:

_____

_____

_____

Master Gardeners may display a sign at the site. Yes_____ No____

Proposed by: _____ (Master Gardener)

Date of Signature: _____

Accepted by: _____ (Project Site Manager)

Date of Signature: _____

Please submit this form to the Project Review Committee through the Extension Office

Project Review Committee_____ Date _____

Executive Committee_____ Date _____

County Extension Agent_____ Date _____

Membership Approval: _____Yes _____No Date _____