

**2021**  
**\$300 Community Grant Application**

LaPorte County Master Gardeners Association (LPCMGA)  
Purdue University Cooperative Extension Service, LaPorte County  
2857 W State Rd. 2, Suite A, La Porte, IN 46350

Phone: [\(219\) 324-9407](tel:2193249407)

<http://www.lpmastergardener.com/>

Applications must be received by the LPCMGA no later than April 30, 2021.

Name of applicant (contact person) \_\_\_\_\_

Name of volunteer project \_\_\_\_\_

Name or organization involved (if any) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State Indiana Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Please describe in detail the project you are proposing. Be sure to include who will benefit from the project described. You may attach additional sheets as needed.

Please provide a list of prices and materials needed for the project. Attach additional sheets if necessary.

What is the total cost of this project? \_\_\_\_\_

How much money are you requesting from the LPCMGA? \_\_\_\_\_

Do you have other funding to complete this project? If yes, what is the source of this funding?

\_\_\_\_\_

Will this project be completed in 2021? \_\_\_\_\_ If not, when will it be completed? \_\_\_\_\_

Who will be responsible for maintenance of this project once it is completed? (name and contact number)

\_\_\_\_\_

I certify that all information on this form is true and factual. I agree that the LPCMGA may use this information and other information provided by me in connection with this program for purposes of news and publicity in all media, including but not limited to print and electronic media, internet websites, and CD-Rom's. If I receive a grant from the LPCMGA, I will supply a poster of my project for the LPCMGA to display at the 2022 Gardening Show.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_