

# Home Vegetable Garden PROGRAM



**Do you and your family want to grow your own food?  
Growing Hope's Home Vegetable Garden installation program  
may be just what you need to get growing!**

Growing Hope is a non-profit organization based in Ypsilanti, Michigan with the mission to help people improve their lives and communities through gardening and increasing access to healthy food. Growing Hope wants to understand the impact of small-space gardening on family food budgets, nutrition, and quality of life: **In 2017, Growing Hope will partner with 15 new households throughout Ypsilanti and provide the materials for three 4ft x 4ft-raised vegetable garden beds. Together we work with household members to install them at their homes.**

*What can you expect from Growing Hope from this program?*

We will provide each participant household with:

- 3 wooden garden beds, each measuring 8 inches tall and 4 feet by 4 feet
- Containers (for those households that do not have a yard for raised beds).
- Soil to fill all the beds
- 10 vegetable or herb seedlings and 10 seed packets of your choice
- A visit to your garden from Growing Hope staff to answer garden related questions
- Supplies to weigh and keep track of your garden harvest

*What does Growing Hope expect from you?*

- Participation in the garden installation process to the best of your physical ability
- Complete and return all surveys in a timely manner
- Have an understanding that it is your responsibility to care for your garden; we are happy to offer advice if you encounter challenges, but regular maintenance is expected
- Track your harvest and return tracking sheets to Growing Hope every month that you harvest

**Does this sound right for you or your family?**

**If so, please fill out the application on the reverse side.**

**To Apply:** Please answer the following questions. The purpose of this form is to determine if your household qualifies for this program and to establish expectations on both ends (what you can expect from us and what we require from you as a participant). **Your personal information will be kept confidential. This program is first come, first-serve, please submit your application as soon as possible.**

| Personal/Household Information |                                   |                                |   |
|--------------------------------|-----------------------------------|--------------------------------|---|
| Name                           |                                   |                                |   |
| Address                        |                                   |                                |   |
| Phone(s)                       |                                   | Email(s)                       |   |
| Your Age                       | <input type="checkbox"/> Under 18 | <input type="checkbox"/> 18-29 | <input type="checkbox"/> 30-39 <input type="checkbox"/> 40-49 <input type="checkbox"/> 50-59 <input type="checkbox"/> 60+ |

| 2017 Qualification Questions  |  |
|---|--|
| Do you have outdoor space at your home/apartment that receives at least 6 hours of sunlight daily and will accommodate 3 garden beds that measure 4ft. by 4ft. each (48 sq. ft. total)? | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| Do you own your home, or have permission to garden on the property?   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| Do you live within 10 miles of the Growing Hope Center (922 W. Michigan Ave.) in Ypsi?  | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| Does anyone in your household participate in or receive assistance from:  | <input type="checkbox"/> EBT/SNAP <input type="checkbox"/> Medicaid <input type="checkbox"/> Disability Benefits <input type="checkbox"/> WIC<br><input type="checkbox"/> Unemployment <input type="checkbox"/> Project Fresh <input type="checkbox"/> Food pantry <input type="checkbox"/> NONE<br><input type="checkbox"/> Other:  |
| What is your household income?:   | <input type="checkbox"/> Less than \$12,000 <input type="checkbox"/> \$12,001 to \$15,999 <input type="checkbox"/> 16,000 to \$20,100 <input type="checkbox"/> \$21,199 to \$25,000<br><input type="checkbox"/> \$25,001 to \$29,999 <input type="checkbox"/> \$30,000 to \$37,999 <input type="checkbox"/> \$38,000 to \$45,000 <input type="checkbox"/> \$45,000 or more |
| How many adults in your household?  | How many children?   |
| Do you have mobility challenges that will be a barrier to gardening in an 8" tall bed? (If so, we will contact you to see if we can accommodate you).                                   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| How many years experience do you have growing food?   | <input type="checkbox"/> None <input type="checkbox"/> 1-2 years <input type="checkbox"/> 3-5 years <input type="checkbox"/> 5-10 years <input type="checkbox"/> 10+ years   |

| Commitment and Program Requirement Questions  |  |
|---|--|
| Are you willing to grow vegetables, herbs and fruits in the garden beds this year?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you prepared to devote regular time from May to October to caring for your garden? (Through we will provide follow-up support through the season, gardening will be your responsibility). | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Will you complete several surveys and track your harvest to help Growing Hope understand the impacts of small-scale gardening?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>To start the program, you must attend a Home Vegetable Gardening 101 orientation.</b><br><b>Which session would you like to attend? Please circle all that you're available for:</b>       |  |
| Thurs., April 13th 1:00pm-3:00pm  | Wed., April 19th 6:00pm-8:00pm                           |
| Sat., April 22nd 10:00am-12:00pm  |  |

If you answered "yes" to most or all of the questions above, please mail or drop off this form to **Growing Hope, ATTN: Bee Ayer, P.O. Box 980129, Ypsilanti, MI 48198** or email your application to [growinggardens@growinghope.net](mailto:growinggardens@growinghope.net).  
 Contact Growing Hope with any questions at (734) 786-8401

First and Last Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_

*Thank you for your interest in the Home Vegetable Gardening program!*