



City of High Point Community Garden Assistance Grant Report for July 2019 – June 2020

This past year, your community garden applied for, and received, assistance from the city of High Point. Please answer the following questions to provide a report to the City. This is an annual report, to be filled out each year that assistance is received by a community garden.

Your name: _____

Community garden name: _____

Community garden address: _____

1) Please give an update on your community garden. What successes and challenges has your community garden faced this year?

2) What crops were grown this year in the community garden? (check all that apply)

- | | | | | | |
|---|-----------------------------------|-----------------------------------|-------------------------------------|---------------------------------------|----------------------------------|
| <input type="checkbox"/> Bean | <input type="checkbox"/> Beet | <input type="checkbox"/> Broccoli | <input type="checkbox"/> Cabbage | <input type="checkbox"/> Cantaloupe | <input type="checkbox"/> Collard |
| <input type="checkbox"/> Corn | <input type="checkbox"/> Eggplant | <input type="checkbox"/> Kale | <input type="checkbox"/> Lettuce | <input type="checkbox"/> Mixed Greens | <input type="checkbox"/> Mustard |
| <input type="checkbox"/> Okra | <input type="checkbox"/> Peas | <input type="checkbox"/> Pepper | <input type="checkbox"/> Radish | <input type="checkbox"/> Rutabaga | <input type="checkbox"/> Spinach |
| <input type="checkbox"/> Squash | <input type="checkbox"/> Tomato | <input type="checkbox"/> Turnip | <input type="checkbox"/> Watermelon | | |
| <input type="checkbox"/> Other (please list): _____ | | | | | |

3) How many people were actively involved in the community garden this year?

Adults (age 18 or older): _____ Youth (younger than 18): _____

4) What is the approximate size of planting area where food is grown? _____ square feet

5) How was the harvest for the garden used? (best guess for percentage % of total harvest)

- | | |
|--|---|
| <input type="checkbox"/> Personal or household meals: _____ | <input type="checkbox"/> Cooking workshops or education: _____ |
| <input type="checkbox"/> Donated to local families or food pantry: _____ | <input type="checkbox"/> Sold at farmers market or stand: _____ |