



HORTICULTURE DEPARTMENT



Hello Educator,

I am pleased to hear of your interest in starting a school garden. In order to best assist you we will need some background information to get started. Please fill out this form and return it at your earliest convenience to drodriguez@ag.tamu.edu.

The El Paso Master Gardeners are highly trained volunteers who give back to the community through educational programs. They are garden consultants and would be happy to meet with your leadership team to provide you technical assistance in designing and selecting your plants. Pending availability, they are able to conduct gardening lessons to youth and adult participants. Please note that our volunteers are not able to build and/or maintain gardens.

Please contact me if you have additional questions. I look forward to reviewing your information sheet and working with you on your gardening program.

Sincerely,

Denise S. Rodriguez, M.S.
County Extension Agent - Horticulture

Ascarate Annex
Texas A&M AgriLife Extension Service
301 Manny Martinez Sr. Drive | 2nd Floor | El Paso, Texas 79905
Tel. 915.771-2354 | Fax. 915.771.2356 | elpaso.tamu.edu

SCHOOL GARDEN INFORMATION SHEET

Contact Name: _____

Phone: _____

Email: _____

School: _____

District: _____

Physical Address: _____

Zip: _____

Participates grade level **K** **1** **2** **3** **4** **5** **6** **7** **8** **9** **10** **11** **12**

Number of Participants: _____

TELL US ABOUT YOUR GARDEN

1. This is a new garden: YES NO
2. We are revamping/upgrading an existing school garden: YES NO
3. We want to grow _____ in our garden:
 - Vegetables
 - Fruit Orchard
 - Native Plant Garden
 - Pollinator/Habitat Garden
 - Other (please specify): _____
4. Our garden location
 - Is in a secure area: YES NO
 - Has a nearby water source: YES NO
 - Has at least 6 hours direct sunlight: YES NO
 - Has well-drained, loose soil? YES NO
5. Our plants will be grown:
 - In ground Raised beds Containers
6. We are interested in a garden curriculum program: YES NO
7. We are interested in establishing an extracurricular gardening program (i.e. after school garden club) YES NO
8. Our garden volunteers are (check all that apply):
 - Teachers
 - Parents
 - Staff
 - Other volunteers (please specify): _____
9. Our garden is funded by (check all that apply):
 - PTO funds
 - Grants
 - Donations
 - Other (please specify): _____
10. Our goals for this school year: _____