

Name of project:

Address of project:

Contact person's name: _____

Address: _____

Phone: _____

E-mail: _____

Provide a brief description of your project.

Describe how your project involves the transfer of UW-Extension based horticulture knowledge or skills to others .

Executive Board approved: _____ Date: _____

Approval of this project indicates that you are free to recruit volunteers to help complete it.

Approved projects are posted at www.OCMGA.net – the Outagamie County Master Gardener website. Click on “Sanctioned Projects” on the left side of the home page.

Signs are available at the UW-Extension Office to display at your project site.