

Northeast Horticultural Therapy Network

GRANT APPLICATION

<http://www.nehorticulturaltherapy.net>

NEHTN offers annual grants for implementation of innovative Horticultural Therapy or Therapeutic Horticulture Programs or expansion of services to existing programs. Grants are awarded to deserving HT/TH programs in established agencies, schools, hospitals or other institutions and individual members. The purpose of this program is to encourage the expansion of HT/TH programming and services to greater numbers of participants within the Northeast region. Grant awards are based on current funding availability, not to exceed \$500.00.

Name: _____

Program/Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Eligibility Requirements

In order to qualify as a grant recipient, applicant must:

- Be a member of NEHTN in good standing for a minimum of one year.

Eligible Funding Activities

- On-going support of program
- One-time project

Award Criteria:

Awards will be based on:

- Documentation of current or proposed programming in horticultural therapy with special populations
- Merit of the applicant's existing and/or proposed HT program
- Justification of financial need

Support Materials:

- Details as applicable regarding type of project, location, time required in preparation, population served, timetable for implementation, benefits, goals, expenses involved, and how this grant money will be utilized.

Applicants are encouraged to submit the following additional materials in support of their applications (*support materials not to exceed 10 pages in length*).

- Photographs, lesson plans and press clippings that provide additional background information on the host facility and the existing HT program.

All projects must be non-profit and conceived or implemented by you or your employer. Projects must involve plant related activities which improve the quality of life for persons with special needs. Funds are not transferable to other projects. One application per member allowed.

Applications must be postmarked no later than November 1st and include one original and TWO copies. Applications with insufficient number of copies will not be considered. Applications must be typed.

The Grants will be awarded by a Review Committee consisting of 3 current members of NEHTN, none of whom are applying for a grant.

Notification of acceptance/denial will be mailed after November 15 and no later than December 31.

Mail to: NEHTN, P.O. Box 4614, White River Junction, VT 05001
E-Mail: info@nehorticulturaltherapy.net

Post Award Requirements

Grant recipients are required to submit a written article to be posted on the NEHTN website within three months after completion of the project. The article must document the following: type of project, implementation process, population served, benefits, goals and how the grant money was utilized. Photographs are welcome but not required.

Signature of Applicant: _____ Date: _____