Florida Agriculture in the Classroom

2019 School Garden Grant Final Report

School Name:

Name:

Email:

Project Title:

Number of Students reached with garden project:

Grade level(s) of students:

Briefly describe your garden. What fruits and vegetables did you plant? Raised beds? Container garden? Hydroponics?

New Plants Planted:

Summarize your school garden project. Did it go according to plans? Include highlights or issues that happened?

Lessons learned. What would you have done differently with your project? What will you do with the project next year?

Summarize your food journal findings. Do your students eat differently? Look at foods differently? Did they try everything in the garden because they grew it themselves?

Estimate the percent of your students that tasted the produce from the garden:

Estimate the percent of your students that tasted a brand-new fruit or vegetable because it was grown in the garden:

Which FAITC School Garden themed lesson(s) did you use during this project?

What was your average pre-test score(s)? Please give us a number from 0-100.

What was your average post-test score(s)? Please give us a number from 0-100.

Include copies of all your receipts. They must equal $500 or more. To be eligible for future grants we must have these.

Include photos of your project. If student faces are in any photos please also include photo release forms.