2022 Community Garden Survey

- Is this a new or continuing garden?
 - Garden is new this year.
 - o Garden is not new, but this is the first year of Extension support.
 - o Garden has been supported by Extension in prior year(s).
- 2. Describe the garden location.
 - School/Early Childhood Center
 - Community/local government land
 - Extension office
 - Park District/Forest Preserve/Nature Center
 - Hospital
 - Other health care facility
 - o Residence-Senior
 - Residence-Subsidized housing
 - Correctional facility
 - o Religious institution
 - Private land
 - Other
- 3. If "other" location, please specify.
- 4. Describe the garden's uses during this growing season. Check all that apply.
 - Demonstration
 - Education
 - Food donation
 - Community garden plots
 - Other food production
 - Environmental-pollinator support
 - Environmental-rain garden (captures rainwater and soaks it into the ground)
 - Environmental-other or general
 - Therapeutic uses
 - Training/life skills
 - Youth engagement
 - Research
 - Historical
 - o Other
- 5. If "other" use, please specify.
- 6. Please describe public access to the garden.
 - Open to public visitors.

- Not open to public visitors (special purpose garden)
- o Other
- 7. Please add notes on public access if needed.
- 8. Please tell us about educational signage at this garden. Check all that apply.
 - No educational signage
 - Plant identification labels
 - Plant cultivation information
 - Plant use information
 - Nutrition information
 - Environmental information
 - o Other
- 9. If "other" signage, please describe.
- 10. Describe Extension's support for the garden this growing season. Include support provided by Extension staff, volunteers, and 4-H participants. Check all that apply.
 - Garden planning
 - Other technical assistance, e.g troubleshooting, advice on pest or disease management
 - On-site garden work, e.g. planting, weeding, harvesting
 - Educational programming at the garden (including via Zoom)
 - New educational signage or resources about the garden
 - Funding or in-kind donation of plants or materials
 - o Other
- 11. If "other" support, please describe.
- 12. Please check all Extension groups that are involved with this garden. Check all that apply.
 - Master Gardeners
 - Master Naturalists
 - o 4-H
 - SNAP-Ed staff
 - ANR/AAB/NREE staff
 - Other
- 13. Please list all internal funds received for the garden **this growing season**. Check all that apply.
 - Growing Together Illinois
 - Know More, Grow More (formerly mini-grants)
 - Other

- 14. If "other" source of internal funds, please describe.
- 15. List all external sources providing funding this reporting year (October-September).
- 16. Total amount of external funds received this reporting year (October-September).
- 17. Contact information
- 18. Enter **email address** of the primary Extension staff contact for internal questions and follow up.
- 19. Enter email address for an additional Extension staff contact for internal use.
- 20. Enter email address for an additional Extension staff contact for internal use.
- 21. Enter email address for an additional Extension staff contact for internal use.