

SLUG APPLICATION: Return the completed application to *SLUG Program, c/o Boston Natural Areas Network, 62 Summer Street, Second Floor, Boston, MA 02110-1008* **OR** fax to *BNAN* at (617) 542-0383 **OR** SLUG@bostonnatural.org



A: Survey of Interest **Please provide year-round contact information if possible.*

School: _____

School Phone: _____

Street Address: _____

Neighborhood: _____ T Access: _____

Administrator Name: _____

Administrator Signature of Support: _____

Administrator Email: _____

SLUG Site Coordinator (SC) Name: _____

SC School Year Phone: _____ Summer Phone: _____

SC School Year Email: _____ Summer Email: _____

Best time of day and mode of contact: _____

Number of Teachers interested in SLUG ____ Number of Students served by SLUG ____

1) Does your school currently implement vegetable gardening, or garden-related activities, to meet curriculum standards? If yes, please describe. If no, please describe your interest in using gardening to meet curriculum standards.

2) Would you (as Site Coordinator) be available to serve on an Advisory Committee (meeting one evening quarterly) to help oversee the development of the SLUG Pilot program? If not, provide the name and contact information for alternate representative(s) from your school:

- 3) SLUG will provide periodic trainings in the how-to's of gardening and integrating garden activities into the BPS curriculum. Please indicate approximately how many teachers and staff from your school you anticipate would be interested in attending. BNAN will provide PDPs for these trainings.

B: Existing Indoor Conditions

- 4) Does your classroom or school currently have any indoor growing materials or equipment, such as a "GrowLab"? If no, please indicate how much indoor space (for each classroom or for each shared space) can be dedicated to indoor growing equipment.

_____ Square Feet

- 5) Does your classroom or school currently compost indoors using a vermiculture bin (worm bin)? If yes, please describe.

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C: Existing Outdoor Conditions

- 6) Does your classroom or school have any outdoor vegetable gardening areas?

- a. If yes, indicate the number and size(s) of beds and indicate who is currently utilizing the beds:

- b. If no, is there a potential site for outdoor gardening?

7) Circle the type(s) of existing vegetable beds: raised bed, container, in soil/ground

8) Circle the type(s) of material existing vegetable bed(s) are constructed from:

Non-treated lumber Treated lumber Recycled plastic Concrete

Other (please describe) _____

9) Location of existing or potential beds: _____

10) Proximity of / access to water spigot: _____

11) If known, soil condition (obtain sample for UMass soil lab test if not:
<http://www.umass.edu/plsoils/soiltest/soilbrochdec2003.pdf>):

12) Beds' (or potential sites') relationship to sun, wind, structures, etc.:

13) Beds' accessibility to diverse populations (note slope, steps, terrain):

14) Do you anticipate that your school will require assistance with summer maintenance of your outdoor garden site? If yes, please describe. If no, please describe how it will be maintained and who will maintain it.



15) Is there an existing outdoor compost system? Yes No

a. If yes, type of compost system: _____

b. If no, describe potential (if any) for compost system:

Additional Notes: _____

Sketch of Site:

**Please include garden site, water access, school building, other structures, and label cardinal directions.*

Thank you for your interest and for taking the time to complete this survey! Once we have received your survey we will contact you soon to further discuss your school's involvement in the SLUG Pilot program.

Questions? Contact SLUG at slug@bostonnatural.org or Jo Ann Whitehead at BNAN (617) 542-7696 extension 15, or email joann@bostonnatural.org

