

California Garden Clubs, Inc.

2017-19 Evaluation Form

Deadline: **DECEMBER 1**

No Book of Evidence. The **CGCI Award Application Form (MAXIMUM 3 sheets** of paper, one side only) is the entry. Place this evaluation form in an envelope and include with the entry.

14. GARDEN THERAPY AWARD

1st \$50 2nd \$25 To a club Eligible for Pacific Region Award #12, NGC Award #G-3

Sponsor: Orange County District

SUBMIT BY **DECEMBER 1** TO Garden Therapy Chairman
Martha Smyser, 4949 Mammoth Avenue, Sherman Oaks 91423-1319

For one or more activities or service projects designed to help those in the community with challenges. Active participation by those being served is not required.

Adheres to Awards General Rules as listed in the Awards Manual	15	_____
Meets deadline (5)		
Maximum 3 pages (5)		
Application form – complete (1)		
Data - all required information is included (3)		
Appearance - photos or items cut from other sources trimmed/mounted/scanned neatly (1)		
Written Report	75	_____
Format:		
Concise but complete (3)		
No typos/correct spelling/grammar (2)		
Content:		
Description of garden therapy program (15)		
Educational value (15)		
Scope of program (15)		
Involvement of members, community, government agencies, professionals, youth, residents in facilities, others (10)		
Benefit to participants (15)		
Include brief history if a continuing project.		
Supporting Evidence	10	_____
Photographs (before and after) (captioned) and landscape plan, if applicable, must be included (5)		
Listing of letters of appreciation, community awards, newspaper/magazine articles, etc. (5)		
TOTAL	100	_____

Club Name _____

District _____