



City of North Little Rock
Fit 2 Live Community Garden Program
PROGRESS REPORT FORM



Garden Name

Ward

Completed by (name)

Date

6-month report

Final report

****PLEASE INCLUDE PHOTOS OF YOUR GARDEN IF POSSIBLE****

Progress Report *Attach additional pages as needed.*

Please describe your progress on the two measurable goals outlined in your application for funding.

Please describe how your garden has been operating. Who oversees the maintenance of the garden? Who manages the garden members? How is food distributed?

Please describe how your garden has evolved since the funding period began/since your last report. Include any highlights or success stories.



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Please describe any challenges you have come across and how you addressed them. What kind of assistance would you like to see from Fit 2 Live?

How many new acres/rows/beds were cultivated or constructed since the funding period began/since your last report?

How many gardeners are involved with your garden?

How many volunteer hours have your gardeners logged?

How many new gardeners have become involved with your garden since the funding period began/since your last report?

Please list the value of any other donations or in-kind contributions to your project this reporting period:

How have you advertised the availability of garden plots and engaged your community?

Have you provided educational opportunities about gardening and/or nutrition? If yes, please describe activity and with whom you partnered.

How can the City of North Little Rock improve the Fit 2 Live Community Garden Program?