



PORTLAND PARKS & RECREATION SM

Healthy Parks, Healthy Portland

- Cash \$ _____
- Check \$ _____
- Initials \$ _____

I would like to:

- Pay for my community garden plot
- Fill out a scholarship form
- Be added to a waitlist
- Request a transfer
- Update my contact information
- Add a co-gardener

COMMUNITY GARDENER INFORMATION

Garden Site: _____ Plot#: _____

Name: _____ Preferred Language: _____

Address: _____ Apt#: _____ City: _____

State: _____ Zip: _____ Email: _____

Primary Phone: _____ Can we send you text messages? **Y** **N**

English Speaking Contact: _____ Relationship: _____

Primary Phone: _____ Email: _____

Co-Gardener Name: _____

Primary Phone: _____ Email: _____

Optional

COMMUNITY GARDENS PROGRAM SCHOLARSHIP APPLICATION

**See reverse for details on scholarships*

Number of adults in household: _____

Entered in ActiveNet: _____

Number of children living at home: _____

TOTAL YEARLY FAMILY INCOME (include child support if applicable):

- 0 - \$23,107
- \$23,108 - \$31,283
- \$31,284 - \$39,460
- \$39,461 - \$47,637
- \$47,638 - \$55,814
- \$55,815 - \$63,991
- \$63,992 - \$72,168
- \$72,169 - \$80,345
- \$80,346 +
- Community Based Organization

NEW PLOT AND TRANSFER REQUEST

Desired Garden: _____

Desired Plot Size:

- \$20 - ADA accessible raised bed (4x8 sq. ft.)
- \$30 - single plot (approx. 100 sq. ft.)
- \$57 - standard plot (approx. 200 sq. ft.)
- \$110 - double plot (approx. 400 sq. ft.)
- \$200 - quad plot (approx. 800 sq. ft.)

Participant Signature: _____ Date: _____

COMMUNITY GARDENS PROGRAM SCHOLARSHIP INFORMATION

Portland Parks & Recreation (PP&R) recognizes that some limited-income residents of the City of Portland require financial assistance to obtain a community garden plot. The information requested below is confidential and necessary to track the assistance we are providing for each applicant.

Financial Assistance Process:

1. Fill out the front side of this application.
2. Request assistance by submitting this application.
3. PP&R will notify you of your award and send you an invoice for your portion of the fee.

Scholarship requests are granted based on income eligibility. Please indicate your yearly family income and number of household members below. We can provide up to 75% scholarship assistance. When an individual applies for a second scholarship within a 12-month period, proof of household income is required. Acceptable forms for verification include: Most recent 1040 income tax return, proof of current Social Security benefits (SSA Benefit Statement or SSA — 1099), proof of disability pay (SSI), proof of current OHP (Oregon Health Plan) or Oregon Trail (food stamps) award letter.

Annual Household Income	Number of People in Household						
	1	2	3	4	5	6	more
0 - \$23,107	75%	75%	75%	75%	75%	75%	75%
\$23,108 - \$31,283	65%	75%	75%	75%	75%	75%	75%
\$31,284 - \$39,460	50%	65%	75%	75%	75%	75%	75%
\$39,461 - \$47,637	35%	50%	65%	75%	75%	75%	75%
\$47,638 - \$55,814	25%	35%	50%	65%	75%	75%	75%
\$55,815 - \$63,991	-	25%	35%	50%	65%	75%	75%
\$63,992 - \$72,168	-	-	25%	35%	50%	65%	75%
\$72,169 to \$80,345	-	-	-	25%	35%	50%	65%
Above \$80,346	-	-	-	-	25%	35%	50%
P Plot - Double Plot - 400 sq ft							
Discount Level	Full Price	25%	35%	50%	65%	75%	
	\$110.00	\$82.50	\$71.50	\$55.00	\$38.50	\$27.50	
J Plot - Standard Plot - 200 sq ft							
Discount Level	Full Price	25%	35%	50%	65%	75%	
	\$57.00	\$42.75	\$37.05	\$28.50	\$19.95	\$14.25	
G Plot - Single Plot - 100 sq ft							
Discount Level	Full Price	25%	35%	50%	65%	75%	
	\$30.00	\$22.50	\$19.50	\$15.00	\$10.50	\$7.50	
E Plot - Starter Plot - 50 sq ft							
Discount Level	Full Price	25%	35%	50%	65%	75%	
	\$15.00	\$11.25	\$9.75	\$7.50	\$5.25	\$3.75	
A Plot - ADA Plot - Raised Bed							
Discount Level	Full Price	25%	35%	50%	65%	75%	
	\$20.00	\$15.00	\$13.00	\$10.00	\$7.00	\$5.00	

Please return your completed scholarship application to:

Community Gardens Office
6437 SE Division St.
Portland, OR 97206

By email: pkcomgard@portlandoregon.gov
By fax: (503) 823-2246

