



Parks
100 Cook Street
Victoria, BC V8V 0B9

250.361.0600
parks@victoria.ca
victoria.ca

Growing in the City **Volunteer Coordinator** **Grant Final Report**

HOW TO COMPLETE:

1. Complete **Final Report Form** in its entirety and send to parks@victoria.ca
2. Assemble required Documentation

Attach the following required documentation to ensure completion of the *Growing in the City* Volunteer Coordinator Grant Final Report.

- ☐ Documentation acknowledging the City of Victoria's funding support
- ☐ High level budget summarizing use of funds and overall project budget
- ☐ (Optional) Photos from the garden activities and signed City of Victoria Media Release Forms

SECTION 1. CONTACT INFORMATION

Non-profit Organization _____ Telephone: _____

Contact Person: _____ Telephone: _____

Mailing Address: _____ Email: _____

SECTION 2. PROJECT INFORMATION

Project Name(s): _____

- 2A. Please describe the activities completed in the eligible garden project(s) this year. How did these deliverables align with the goals listed in your application? If your project is an allotment garden, please also note how many allotment plots there are and how many people are currently on the waitlist.



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SECTION 3. VOLUNTEER ENGAGEMENT

3A. Please share volunteer data you are tracking, including:

Number of volunteers who participated in the garden:	
Estimated total volunteer hours spent on garden maintenance:	
Estimated total volunteer hours spent on other duties:	
Any other volunteer metrics you are tracking (if any):	

3B. Volunteer activities. Please provide a brief description of how volunteers are engaged in the garden project(s). Include the total number of work parties held this year, how work parties are structured and/or scheduled, what activities are typical and any other relevant information.



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3C. Volunteer Outreach. Please describe the marketing activities and steps taken to obtain, retain and appreciate volunteers.



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SECTION 4. GROWING IN THE CITY ELIGIBLE GARDEN PROJECT EVENT DETAILS

4A. Please list any workshops, tours or other special events, organized and hosted in the garden(s) this past year. Please do not include regular volunteer work parties in this list, as they are described in the previous section.

Event Title:	Date:	Number of attendees:

4B. Describe any tours, events, or workshops listed above. Please briefly include themes, activities, collaborations (name partner organizations), outreach and audiences reached, and/or outcomes where appropriate. Please indicate if the events were funded in whole or part by this grant or other sources. Lessons learned are also welcome.



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SECTION 5. COMMUNITY IMPACT

5A. Please share stories of impact to illustrate who benefits from the gardens. Include any specific groups, partnerships or collaborations, and any equity considerations you'd like to share. You may also share up to three stories of how the project(s) has positively impacted an individual community member, volunteer or neighbour.



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Please attach any relevant photos from the garden activities undertaken. Please have photo participants sign the City of Victoria Media Release Forms (see Media Release Form attached).

SECTION 6. PUBLIC ACKNOWLEDGEMENT

Have you acknowledged publicly the receipt of the *Growing in the City* Volunteer Coordinator Grant awarded by the City of Victoria?

☐ **Yes** – What method was used?

- | | |
|---|--|
| ☐ Website | ☐ Newspaper advertisement |
| ☐ Social media | ☐ Newsletter |
| ☐ Sponsor plaque | ☐ Annual Report |
| ☐ Other _____ | |

☐ **No** – How will the City of Victoria be publicly acknowledged and when? Date: _____

- | | |
|---|--|
| ☐ Website | ☐ Newspaper advertisement |
| ☐ Social media | ☐ Newsletter |
| ☐ Sponsor plaque | ☐ Annual Report |
| ☐ Other _____ | |

Please provide Documentation acknowledging the City of Victoria's funding support.

SECTION 7. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.

Signature of authorized officer of support organization

Position

Name

Date



Model Release Form

I hereby give the City of Victoria the absolute right and permission to copyright and/or publish, or use photographic portraits or pictures of me, or pictures in which I may be included in whole or in part, or reproductions thereof in colour or otherwise, made through any media, for art, advertising, publication, video, internet, trade or any other lawful purpose whatsoever, in the communication of information or promotion of the City of Victoria.

Description/use: Annual Report and/or promotional use for the City of Victoria

Model Name: _____
(PLEASE PRINT)

Parent/Legal Guardian: _____
(PLEASE PRINT)

Signature: _____

Date: _____

Please sign and return to:

Engage Department
City of Victoria
1 Centennial Square
Victoria, BC V8W 1P6