

2014 Fall Youth Gardens Educator's Training

TEXAS A&M
AGRI LIFE
EXTENSION

When: **September 6, 2014 from 9 am – 3 pm**
(8:30am –Registration)

Where: **Education Service Center, Region 20**
1314 Hines, San Antonio, TX 78208

Come join us this September for the Fall Youth Gardens Educator's training class. This program is designed for teachers, educators, and volunteers in support of Youth Gardening in the classroom and community.

Participants will learn how to begin a youth garden. Breakout sessions will be conducted to aid educators in enhancing their garden and curriculum. If you are interested in starting a gardening program in your school or community do not miss this educational opportunity! Plant materials will be distributed to participants who complete this training (Plant material is given per school/institution). **Training and lunch is provided at no cost to participants.**

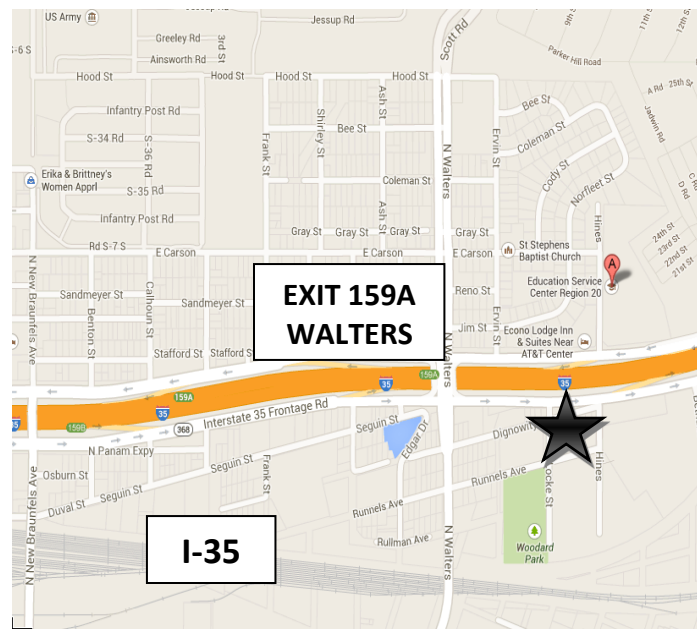
Certificates & **CPE hours (4 credits)** will be awarded for completion of this program.

For an application, call Texas A&M AgriLife Extension Service, Bexar County office at 210 467-6575 or go on the web at <https://bexar-tx.tamu.edu/> and download the application.

Have Questions? Contact Me!

Ruby Zavala - Youth Gardens Coordinator

Texas A&M AgriLife Extension Service
3355 Cherry Ridge Dr. Suite #208
San Antonio, TX 78230-4818
Phone (210) 467-6575
Fax (210) 930-1753





2014 Fall Youth Gardens Educator's Training

September 6, 2014 at Education Service Center, Region 20
Registration starts at 8:30am; Training is 9:00 am – 3:00 pm
Address: **1314 Hines, San Antonio, TX 78208**

Registration Form

Deadline for registration is August 29, 2014
Mail in application to: *Ruby Zavala, Youth Gardens Coordinator*
3355 Cherry Ridge Dr. Suite 208, San Antonio, TX 78230-4818
210 467-6575 Fax 210 930-1753
ruby.zavala@ag.tamu.edu

School District _____ Full School Name _____

Principal/Supervisor's Full Name _____

Your Full Name _____

Contact Information:

School Address _____

City _____ State TX Zip Code _____

Teacher Email Address _____@_____ . _____

Personal Email Address _____@_____ . _____

(All information is disseminated by email address only)

School Phone # _____ Your Cell Phone # _____
Area Code Phone Number Area Code Phone Number

Grades Taught (Check): 1 2 3 4 5 6 7 8 9 10 11 12

Other Audience involved in gardening Community Family Other _____

Have you participated in the Youth Gardens Program before? Yes No

Do you have a Classroom Garden Program at your school? Yes No

(If **YES**, please answer the following)

Leader of the Classroom Garden (name): _____

How do you financially support your garden? Grants Fundraisers P.T.A School Funds

Other _____



Classroom Gardens - Group Enrollment Form

Complete & fax or email to: ruby.zavala@ag.tamu.edu Fax 210 930-1753

School District _____ School Name _____

Name of Educator _____

Gender (Youth)	
Male	
Female	
Total	

Grade Level			
Grade	Number of Participants	Grade	Number of Participants
K		8	
1		9	
2		10	
3		11	
4		12	
5		12+	
6		Not in School	
7		Special	
Subtotal ☺		Subtotal ☺	
		Total ☺	

Youth Participants

Leaders & Teachers: Use your best estimates. Please indicate the race and ethnicity of participants.	Ethnicity
Racial Groups:	
Hispanic	
White	
Black or African American	
American Indian or Alaska Native	
Asian	
Native Hawaiian / Other Pacific Islander	
Total ☺	

Adult Participants

Leaders & Teachers: Use your best estimates. Please indicate the race and ethnicity of participants.	Ethnicity
Racial Groups	
Hispanic	
White	
Black or African American	
American Indian or Alaska Native	
Asian	
Native Hawaiian / Other Pacific Islander	
Total ☺	

Classification of Volunteers	Adult Volunteers	
	Male	Female
Direct		
Indirect		
Total		

Direct – Works directly with youth.

Indirect – Supports work with youth through providing resources.