



**Southwestern Indiana Master Gardener Association, Inc.**

13301 Darmstadt Road  
Evansville, IN 47725  
(812) 867-4935



**Ongoing Project: Review of Current Year**

**Project Name:** \_\_\_\_\_

**Today's Date:** \_\_\_\_\_

**Address or nearest intersection:** \_\_\_\_\_

\_\_\_\_\_

**Chairperson(s):** \_\_\_\_\_

\_\_\_\_\_

**Host name and contact phone:** \_\_\_\_\_

**Budget:**

**Approved budget for past year: \$** \_\_\_\_\_

**Reported expenses for past year: \$** \_\_\_\_\_

**Remaining expected expenses: \$** \_\_\_\_\_

**Project goals for the past year (educational and other):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please describe accomplishments for the past year:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What methods of teaching were used at this project? \_\_\_\_\_

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What unusual challenges or opportunities came up this year? (*Discuss unachieved or partially achieved goals, as well as unanticipated accomplishments*)

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**For SWIMGA Board Use only**

Date of review: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

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President: \_\_\_\_\_

Extension Advisor: \_\_\_\_\_

*Note: this form should be filled out by the project chairperson and submitted to the Board of Directors for approval. One copy will be retained by the Project Coordinator.*