

# Niles Community Gardens, Inc.

## Documentation for Local, State and Federal Grant Programs

Niles Community Gardens, Inc. (NCG) participates in various grant programs including local, state and federal grants, both public and private. Grant funds are used to develop, promote and operate the programs of NCG. Grant requirements frequently require demographic documentation of the individuals and families we serve through our programs. The documentation requested here is only for purposes of statistical validation. Your answers do not determine the eligibility of interested gardeners and are kept confidential.

### Annual Family Household Income

1-person	2-person	3-person	4-person	5-person	6-person	7-person
\$30,750	\$35,150	\$39,550	\$43,900	\$47,450	\$50,950	\$54,450

Using the above income figures for the number of persons in your household, is your income greater than or less than the figures above?

\_\_\_ For the size of my family, my income **does not exceed** the above figure.

\_\_\_ For the size of my family, my income **exceeds** the above figure.

### Race/Ethnicity

Please check your appropriate race.

Note: Hispanic is an ethnicity category that cuts across all races. Those who are White, Black, Asian, American Indian/Asian Native or Native Hawaiian/Other Pacific Islander or Other Multi-Racial may be considered Hispanic.

### Hispanic

White	_____	_____
Black/African American	_____	_____
Asian	_____	_____
American Indian/Asian Native	_____	_____
Native Hawaiian/Other Pacific Islander	_____	_____

### Age

\_\_\_\_\_ I, or someone in my household is at least 64 years of age. How many? \_\_\_\_\_

\_\_\_\_\_ Someone in my household is under the age of 18. How many? \_\_\_\_\_

### Disability

\_\_\_\_\_ I, or someone in my household, has a documented physical or mental disability.

Household Size

\_\_\_\_\_ Number of Persons in Household

Number of Gardeners in Household

\_\_\_\_\_ Number of Persons in Household Who Will Be Gardening

Head of Household

\_\_\_\_\_ I am a female head of household.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Date

Thank you for your participation. Your information will assist NCG with future projects to improve our community.