

Kitigànensag is a project of the Graduate Students' Association

Local 78, Canadian Federation of Students

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(613) 520-6616 garden@gsacarleton.ca

Kitigànensag - Plot Application Form

The GSA Community Garden

Kitigànensag, Algonquin for "little gardens," is a place for students, staff and faculty to come together to grow and enjoy healthy, socially just, and sustainable food. All members of the Carleton community are invited to apply.

The garden is located at the southeast corner of the Nesbitt building, beside the River field (where the GSA softball league is held). Plots will be ready for planting in May 2017, and the average plot size is 4 by 6 feet.

We aim to accommodate as many participants as possible. Depending on the number of applicants, plots may be allocated through a lottery system.

Successful applicants must be in the Ottawa area and commit to maintaining their garden plot beginning in May and continuing through September at a minimum (the garden will remain active through October). If an applicant is not able to commit to maintaining their plot, it is recommended that the applicant share the plot with others.

Applications are due at noon on Friday, April 7 and can be submitted in hard copy to the GSA office or via email at garden@gsacarleton.ca.

The following pages are to be completed by the applicant(s), please print legibly:

PERSONAL INFORMATION

FULL NAME		STUDENT NUMBER (IF APPLICABLE)				
LOCAL STREET ADDRESS		CITY				
PROVINCE		POSTAL CODE				
PHONE		EMAIL ADDRESS				
2. Will you be gardening your plot alone, or will you be sharing the plot with one or more people?						
☐ Alone	\square With one or more people					
3. a) If you are applying as a solo gardener, would you be interested and willing to share a plot?						
☐ Yes	□ No					
THIS BOX FOR OFFICE USE ONLY:						
DATE RECEIVED	RECEIVED BY OA	STAFF REVIEWER	CG-17 #			
	COMMENTS					

CO-APPLICANT 1					
FULL NAME			STUDENT NUMBER (IF APPLICABLE)		
LOCAL STREET ADDRESS			CITY		
PROVINCE			POSTAL CODE		
PHONE			EMAIL ADDRESS		
CO-APPLICANT 2					
FULL NAME			STUDENT NUMBER (IF APPLICABLE)		
LOCAL STREET ADDRESS			CITY		
PROVINCE		POSTAL CODE			
PHONE		EMAIL ADDRESS			
CO-APPLICANT 3					
FULL NAME			STUDENT NUMBER (IF APPLICABLE)		
LOCAL STREET ADDRESS			CITY		
PROVINCE			POSTAL CODE		
PHONE			EMAIL ADDRESS		
			itional applicant infor		
	UNDERGRADUATE STUDENT	GRADUATE STUDENT	STAFF	FACULTY	OTHER (I.E. COMMUNITY MEMBER)
APPLICANT					
CO-APPLICANT 1					
CO-APPLICANT 2					
CO-APPLICANT 3					
b) If you identi University o		'Other', please	provide details on the	eir connection to th	e Carleton

b) If more than one person will be tending the garden plot, please fill out the co-applicant(s) section below:

5. Do you or your co-applicant(s) rec	quire accommodations, such as a wheelchair accessible plot?		
□ Yes	□ No		
If Yes, please provide details:			
	and and accept that all participants in the GSA Community Garden Program liability waiver and code of conduct agreement:		
□ Yes	□ No		
7. Please provide any additional cor	nments or information:		