



National Garden Clubs, Inc.

FORM 7

FLOWER SHOW SCHOOL SUMMARY

Email completed form to the NGC Accrediting Chairman for that Region.

Course Number _____

CITY, STATE: _____ DATES COURSE HELD: _____

TOTAL ATTENDING COURSE: _____ (Include all part-time registrations)

TOTAL STUDENT EXAMINATIONS: _____ TOTAL REFRESHER EXAMINATIONS: _____

TOTAL EXAMINATION FEES: (enclosed check amount: \$5.00 per student payable to NGC, Inc.) \$ _____

TOTAL FAILING PAPERS: _____ (Failure distribution shown below)

WRITTEN EXAMINATION: FSP _____ HORTICULTURE _____ DESIGN _____

POINT SCORING EXAMINATION: STUDENT HORTICULTURE _____ STUDENT DESIGN _____

REFRESHER HORTICULTURE _____ REFRESHER DESIGN _____

SUBJECTS

INSTRUCTORS

FLOWER SHOW PROCEDURE (2 hrs.) _____

HORTICULTURE (5 hrs.) _____

DESIGN (5 hrs.) _____

State Flower Show Schools Chairman Signature

DATE RECEIVED: _____

DATE ACCREDITED: _____

NGC Accrediting Chairman for that Region Signature