

# *Garden Journal*







# Garden Calendar

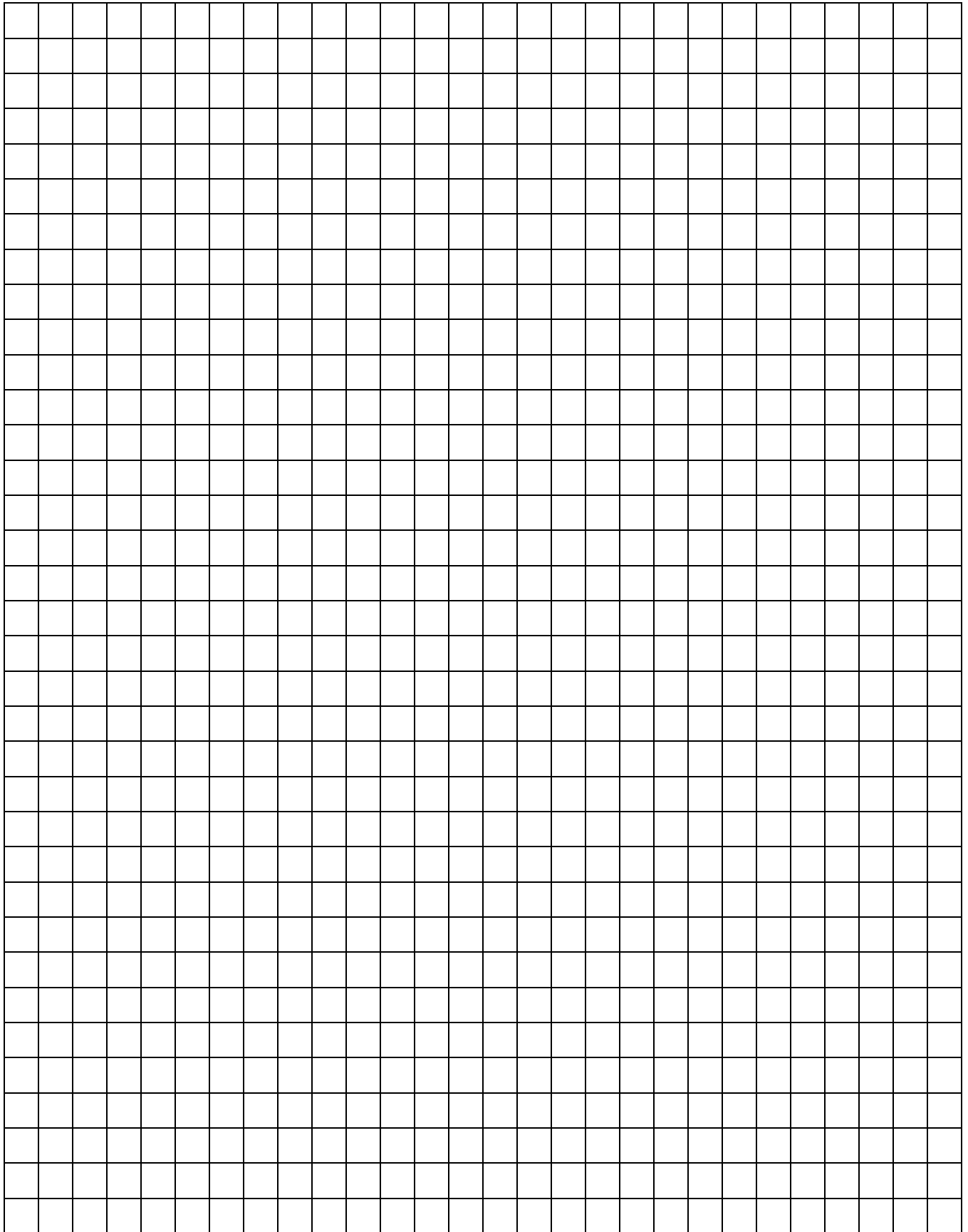


Month \_\_\_\_\_ Year \_\_\_\_\_

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>

# Garden Layout

Use the graph below to layout your garden bed for size and spacing. Each square is approximately one square foot.

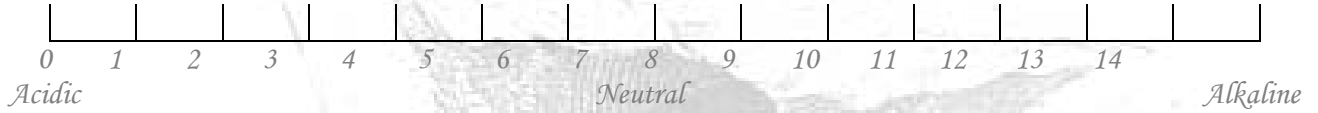


# Soil Analysis

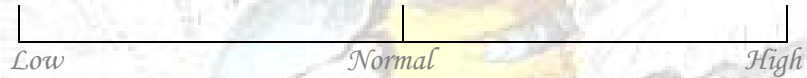
Many do-it-yourself soil kits allow you to test for soil pH as well as for nitrogen, phosphorous, and potassium. You can track your results here.  
For a more thorough analysis, contact your county extension office and attach their findings to this sheet.

Garden Area \_\_\_\_\_ Year \_\_\_\_\_

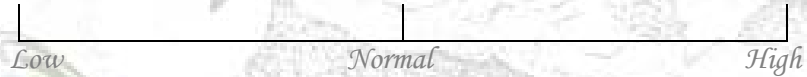
### pH Balance



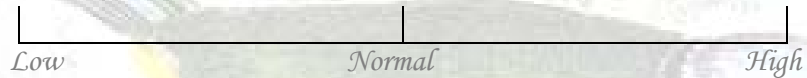
### Nitrogen Levels



### Phosphorous Levels



### Potassium Levels



Type of Soil: Clay, Sandy, Silt, Rocky

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### Soil Amendments Added

Type of Amendment	Amount
Manure	
Compost	
Sand	
Sulfur	
Saw Dust	
Limestone	
Peat Moss	
Gypsum	



# Individual Plant Analysis - Edibles

Name \_\_\_\_\_ Variety \_\_\_\_\_

Acquired From \_\_\_\_\_ Cost \_\_\_\_\_ Date Planted \_\_\_\_\_

Expected Harvest Date \_\_\_\_\_ Actual Harvest Date \_\_\_\_\_

Planting Notes \_\_\_\_\_

\_\_\_\_\_

Pest Problems \_\_\_\_\_

\_\_\_\_\_

Location \_\_\_\_\_ Moved to \_\_\_\_\_ Date \_\_\_\_\_

Additional Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Place a picture of the plant below or use the area for more notes.*

# Individual Plant Analysis - Ornamentals

Common Name \_\_\_\_\_ Botanical Name \_\_\_\_\_

Acquired From \_\_\_\_\_ Cost \_\_\_\_\_ Date Planted \_\_\_\_\_

Plant Type \_\_\_\_\_ Bloom Color \_\_\_\_\_ Foliage Color \_\_\_\_\_

Hardiness Zone \_\_\_\_\_ Bloom Fragrance \_\_\_\_\_ Foliage Fragrance \_\_\_\_\_

Expected Height \_\_\_\_\_ Actual Height 1<sup>st</sup> year \_\_\_\_\_ 2<sup>nd</sup> year \_\_\_\_\_ 3<sup>rd</sup> year \_\_\_\_\_

Expected Width \_\_\_\_\_ Actual Width 1<sup>st</sup> year \_\_\_\_\_ 2<sup>nd</sup> year \_\_\_\_\_ 3<sup>rd</sup> year \_\_\_\_\_

Planting Notes \_\_\_\_\_

Pest Problems \_\_\_\_\_

Location \_\_\_\_\_ Moved to \_\_\_\_\_ Date \_\_\_\_\_

Additional Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Place a picture of the plant below or use the area for more notes.*





# Seed Starting Journal – Edibles

## Indoor

Name \_\_\_\_\_ Date Sown \_\_\_\_\_ Date Sprouted \_\_\_\_\_

Type of Light / Hours per Day \_\_\_\_\_ Date Transplanted \_\_\_\_\_

Notes \_\_\_\_\_

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Name \_\_\_\_\_ Date Sown \_\_\_\_\_ Date Sprouted \_\_\_\_\_

Type of Light / Hours per Day \_\_\_\_\_ Date Transplanted \_\_\_\_\_

Notes \_\_\_\_\_

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Name \_\_\_\_\_ Date Sown \_\_\_\_\_ Date Sprouted \_\_\_\_\_

Type of Light / Hours per Day \_\_\_\_\_ Date Transplanted \_\_\_\_\_

Notes \_\_\_\_\_

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Name \_\_\_\_\_ Date Sown \_\_\_\_\_ Date Sprouted \_\_\_\_\_

Type of Light / Hours per Day \_\_\_\_\_ Date Transplanted \_\_\_\_\_

Notes \_\_\_\_\_

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Type of Light / Hours per Day \_\_\_\_\_ Date Transplanted \_\_\_\_\_

Notes \_\_\_\_\_

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Type of Light / Hours per Day \_\_\_\_\_ Date Transplanted \_\_\_\_\_

Notes \_\_\_\_\_

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Name \_\_\_\_\_ Date Sown \_\_\_\_\_ Date Sprouted \_\_\_\_\_

Type of Light / Hours per Day \_\_\_\_\_ Date Transplanted \_\_\_\_\_

Notes \_\_\_\_\_

# Seed Starting Journal – Ornamentals

## Indoor

Name \_\_\_\_\_ Date Sown \_\_\_\_\_ Date Sprouted \_\_\_\_\_

Type of Light / Hours per Day \_\_\_\_\_ Date Transplanted \_\_\_\_\_

Notes \_\_\_\_\_

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Name \_\_\_\_\_ Date Sown \_\_\_\_\_ Date Sprouted \_\_\_\_\_

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Notes \_\_\_\_\_

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Notes \_\_\_\_\_

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Type of Light / Hours per Day \_\_\_\_\_ Date Transplanted \_\_\_\_\_

Notes \_\_\_\_\_

# To Do List

Month \_\_\_\_\_

<i>Week 1</i>	<i>Completed Date</i>
<i>Week 2</i>	<i>Completed Date</i>
<i>Week 3</i>	<i>Completed Date</i>
<i>Week 4</i>	<i>Completed Date</i>



# Plant Wish List

Date \_\_\_\_\_

<i>Plant Name, Description, Source</i>	<i>Picture of Plant</i>

