

**EXTENSION MASTER GARDENER
VOLUNTEER APPLICATION**



Name _____ Nickname _____

Email _____ Spouse (or significant other) _____

Address _____
City State Zip Code

Phone (home) _____ (work) _____ (cell) _____

Current employment status:

☐ retired ☐ work full-time ☐ work part-time ☐ not employed for pay

Have you ever applied to a Master Gardener Program before? _____

If so, where? _____ When: _____

List your top three areas of gardening interest. Examples: vegetables, roses, houseplants

Training classes and many other activities are held on *Wednesday mornings*. Will your schedule accommodate this? _____ *(If not, your participation will, unfortunately, not be possible.)*

How did you learn of the Master Gardener Program? _____

Do you know anyone who is currently a Guilford County Master Gardener? If so, who?

Why do you wish to become a Master Gardener Volunteer?

List any special **skills** you would be **willing to share** in a volunteer capacity.

(e.g. computer technology/intranet site, marketing, teaching/curriculum development, photography)

Previous Volunteer Experience:

Organization	Position	Number of Years
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Check the volunteer EMG Programs that interest you. **During the Intern year many of these areas have required hours, as noted with an asterisk.** Don't worry if you aren't certain what to check; your first year will be structured to give you experience in most of these areas so you'll be able to find your niche.

- _____ Speaker's Bureau*
- _____ Media Outreach
- _____ Demonstration Garden Maintenance*
- _____ Youth Outreach*
- _____ Community Garden Outreach*
- _____ Passalong Plant Sale and Festival (spring fundraiser)*
- _____ Gardening Gala and Seminar
- _____ Continuing Education
- _____ Information Line*
- _____ Office Support/Mailings/Copying
- _____ Computer Technology/Intranet Site
- _____ Social

List two non-related references (eg. work, volunteer org., school, church, etc.) that we may contact:

- | | <u>Name</u> | <u>Affiliation</u> | <u>Phone Number OR Email</u> |
|----|-------------|--------------------|------------------------------|
| 1. | _____ | | |
| 2. | _____ | | |

I wish to become a Master Gardener Volunteer and would like to be accepted into the training program. I understand that if accepted into the program, I will attend the required hours of training sessions and volunteer at least 50 hours, including 15 hours on Infoline phone duty, within the first year in the Master Gardener Program. If any classes are missed, I understand that I will be required to demonstrate my mastery of the material through testing. I understand that there is a training fee (currently \$100, but subject to change in the future) and a specific number of both Volunteer and Continuing Education hours required annually thereafter. I also understand that I may refer to myself as a Master Gardener only after completing the training year, and only as long as I remain a participant in the program.

Signature _____

Date _____

Application Deadline
OCTOBER 31, 2013

Linda Brandon
Master Gardener Volunteer Coordinator
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Greensboro, North Carolina 27405
(336) 375-5876
linda_brandon@ncsu.edu

North Carolina State University and North Carolina A&T State University commit themselves to positive action to secure equal opportunity regardless of race, color, creed, national origin, religion, sex, age, or disability. In addition, the two Universities welcome all persons without regard to sexual orientation. North Carolina State University, North Carolina A&T State University, U.S. Department of Agriculture, and local governments cooperating.

Please provide us with your date of birth (month and day, at least). *This information is NOT taken into account in any way as part of the application process.* _____

Please provide your tshirt size. We order EMGV logo shirts from time to time, and it would be helpful to have your size on file now. All of the sizes run pretty true to actual size:

_____ (women's) _____ (men's)

The Cooperative Extension Service (CES) considers very important the privacy of your personal information. However, consistent with state law, most mailing lists maintained by CES are subject to public release upon request. These mailing lists may include names, mailing and email address, and phone numbers. Please consider this when participating in our programs, or when you provide contact information to CES in conjunction with our programming.



8/22/12