

APPLICATION TO THE MASTER GARDENER VOLUNTEER PROGRAM (2011**)

PART: I – THE APPLICATION

Mission Statement: The Alabama Master GardenerSM Program is an educational outreach program provided and administered by the Alabama Cooperative Extension System (ACES). It is a program to train individuals who will volunteer their expertise and services in support of the Extension effort related to education. Important to this mission we strive to create an environmental awareness and enhance the development of an environmental ethic in the citizens of Alabama.

Certification Requirements: These are the minimum requirements for achieving the Alabama Master Gardener certificate.

- Provide the necessary information and permission for a criminal background check
- Sign the Alabama Master Gardener Program Memo of Agreement
- Attend a minimum of 40 hours training instruction
- Achieve an average passing score on all tests
- Report to the ACES a minimum of 50 hours approved volunteer service

Date of application _____

First Name _____ Last Name _____

Emergency contact – name and phone _____
- relationship (i.e. spouse) _____

Home Address, Street _____

City _____ State _____ Zip _____

Applicant's Email _____

Phone: home () _____

If employed, where _____ Phone: (____) _____

1. Have you applied to the Master Gardener Program before? Yes No
When? _____ Where? _____
Why are you re-applying? _____

2. Master Gardeners represent the Alabama Cooperative Extension System in their communities. Have you participated in any Alabama Cooperative Extension System programs in the past? Please list the most recent.

3. How did you learn about the Master Gardener Program?

4. Please describe your previous or current volunteer experiences – include non-gardening as well as gardening experiences. Master Gardener is about improving the quality of life in Alabama through volunteerism.

5. Describe specific ways you plan to contribute to the Alabama Master Gardener program. What is your most comfortable venue, or audience for public interaction (writing, phone, email, face-to-face; adults, children, people w/special needs, etc)?

6. When is volunteer work easiest for you (day of week, time of day, weekends, etc)? Specify the best days and times for your volunteer projects.

7. List the aspects of gardening you especially enjoy. This will help us identify how your knowledge and experience can help us to meet our educational objectives.

8. Why do you want to become a Master Gardener volunteer?

9. Do you want to share other information about yourself for this application? (example: I can only participate if my friend is also accepted, or any other special considerations for your entry to the program)

10. Have you ever been convicted of a felony? Yes No Date: _____
 (Note: a conviction record does not necessarily disqualify your application)

All applicants should understand that:

- Submission of this application does not guarantee acceptance to the program
- I must donate a minimum of 50 hours volunteer time to the Alabama Cooperative Extension System as an Intern Master Gardener volunteer within one year of training to receive certification
- I understand my top priorities as an Intern Master Gardener are:
 - to assist a Home Grounds Helpline and/or help other County Extension office programs
 - to assist with 4-H activities
- I further understand that these two priorities will be explained to me before starting the training program.
- **Upon submission of this application a criminal background investigation will be conducted.**
- Payment should not be sent with this application. Payment of the registration fee is due upon acceptance to the program and is due prior to the first day of training class.

Signature _____

Date _____

PART: II – THE MEMO OF AGREEMENT

Description

This agreement is intended to indicate the seriousness with which the Alabama Cooperative Extension System considers its relationship with volunteers. The intent of the agreement is to assure you of both our appreciation of your services and to indicate our commitment to do the very best we can to make your volunteer experience productive and rewarding.

In the capacity of a Master Gardener volunteer, I understand and agree:

- To disseminate Alabama Cooperative Extension System sanctioned, land-grant university research based horticultural related information to all who request it, without regard to sex, race/color, religion, national origin, age, Veteran's status, or disability.
- To only provide horticultural information endorsed and sanctioned by the Alabama Cooperative Extension System and to refer all questions concerning commercial horticulture/agriculture to an Extension Agent.
- To make non-commercial, home horticulture related pesticide recommendations, written or verbal, **ONLY** when they are consistent with published Alabama Cooperative Extension System recommendations (ANR-500B). Local programs may require that an Extension agent handle all chemical recommendation. **Check with your Extension agent first.** The Tri-County Master Gardener Program requires a minimum of 10 hours volunteer time on the Helpline and/or in direct support of other ACES programs.
- To comply with training (52 hours in class), documentation of approved volunteer hours (min 50), and all other certification requirements as delineated in the Master Gardener Program Policy. Reference Chapter 1 in the Master Gardener Handbook
- To provide my own transportation and pay my own expenses incurred as part of official volunteer activities (a Master Gardener's expenses may be tax deductible with proper documentation).
- To refrain from using alcohol or illicit drugs while participating in volunteer activities, volunteering while intoxicated, and from possessing any weapons during volunteer activities.
- To my responsibilities as described in the Description of Volunteer Duties and Responsibilities (page 5). I further understand that as a volunteer, the ACES and Auburn University will not provide me with medical insurance.
- To cooperate with and support Extension employees and fellow Master Gardeners to jointly further the mission and objectives of the Master Gardener program.
- To cultivate and uphold a trustful relationship with Extension staff and other volunteers, and consistently exhibit a professional manner to staff, volunteers, and the public
- To use the title of Master Gardener as it is intended: to identify an individual, who has received training in horticulture and related subject areas, and actively volunteering with the Master Gardener program. I understand that I may only identify myself as a Master Gardener when doing unpaid, volunteer public service on behalf of the ACES. I further understand that the function and existence of the Alabama Master Gardener educational program is subject to the complete discretion of the Alabama Cooperative Extension

System.

- To refuse to accept any personal gratuitous payment for speaking or any other volunteer service activity on behalf of the Alabama Cooperative Extension System.
- To refrain from using my name with the title of Master Gardener for commercial publicity or private business. Participating in a commercial activity, having association with commercial products, or giving implied University or Extension System endorsements to any product or place of business is in violation of Extension policies.

I further understand that the Alabama Cooperative Extension System will:

- Disseminate research based, land grant university horticultural information to all who request it, without regard to sex, race, religion, color, national origin, age, Veteran's status, or disability.
- Support the Alabama Master Gardener Program volunteers, with Extension agents and the State Extension Master Gardener Program Coordinator serving in an educational advisory capacity to local Master Gardener Associations and the Alabama Master Gardeners Association, Inc., respectively. Support will be to:
 - Provide equipment, training, supervision and direction to create a safe volunteer experience.
 - Communicate the expectations of and the responsibilities to the program with volunteers.
 - Uphold and cultivate a trustful relationship between Extension employees and volunteers.
 - Dismiss a volunteer who violates the policies of this program

The following are grounds for immediate dismissal: possession of/or abuse of alcohol or illicit drugs while volunteering, abuse or theft of property, sexual harassment or misconduct, verbal abuse of others, possession or use of weapons while volunteering, defamation of the program or its affiliates.

I have read and understand this Memorandum of Agreement, and the Master Gardener Program Policy, and further agree to abide by the conditions of this memorandum until it is revoked or revised.

Volunteer's Name (please print)

County Name

Volunteer's Signature _____ (Date)

Extension Agent's Signature _____ (Date)

(A copy of this Memo of Agreement will be given to you as reference to keep)