

**The West Virginia University Extension Service
Volunteer Application**

(To be completed by all potential Master Gardener volunteers)

General Information

Name: _____
(First) (Middle) (Last)

Mailing Address _____
(Street) (City) (State) (Zip)

Employer _____ Email _____ @

How long have you lived at this address (years): _____

Phone: Day _____ Evening _____ Best time to call: _____

Master Gardener Information

1. What kind of gardening are you interested in: vegetables, flowers, houseplants, landscaping, lawns, etc....

2. Summarized your gardening experiences:

3. When are you available for volunteer activities:

_____ Daytime _____ Evenings _____ Weekends

4. What groups or organizations have you been a member of (gardening and non-gardening)?

5. The following is a partial list of areas where Master Gardeners have fulfilled their volunteer time. Check those where you think you would prefer to volunteer.

.....Giving talks to groupsWorking in demonstration gardenJudging at fairs or festivals
.....Answering telephone inquiresTeach future Master Gardener classHorticulture therapy
.....Staffing flower show boothsWorking with childrenAdvising community gardeners
.....Writing garden articlesWorking in school gardensOther:

6. Why should you be selected for this program?

Youth Volunteer Interest If you have no interest in working with youth, skip to the next section.

Do you prefer to work directly with: Youth Adults Both

Have you even been a youth volunteer? Yes No

Why are you interested in working with the youth program?

If you prefer to work directly with youth, what age level(s) do you prefer?

Ages 5-8 Ages 9-12 Ages 13-19 No preference

Volunteer and Work Experience

Have you ever been a volunteer? Yes No If yes, how many years? _____

What time commitment do you desire initially?

1-2 months per year 3-6months per year 7-12 months per year Ongoing

Previous Volunteer Experience: *(List current or most recent experience first; list any youth experience)*

Organization

Volunteer Role

Year

Previous Work Experience: *(List current or most recent experience first)*

Employer

Position Title

Year

Personal Information

Have you been convicted of a crime in the last seven years?

If yes, please give date, nature and disposition of offense.

(Please note: A criminal record will not necessarily prevent an applicant from being a volunteer; a criminal record will be considered as it relates to specifics of the volunteer position for which you are applying.)

References (Please supply complete mailing addresses)

1. Name: _____ Relationship: _____

Address: _____
(Street) (City) (State) (Zip)

Phone: Day: _____ Evening: _____

2. Name: _____ Relationship: _____

Address: _____
(Street) (City) (State) (Zip)

Phone: Day: _____ Evening: _____

I authorize WVU Extension to contact listed references. I understand that the misrepresentation or omission of information requested is just cause for nonselection as a program volunteer. I waive any right to review these references.

Applicant Signature

Date

MASTER GARDENER VOLUNTEER AGREEMENT

I understand that the title "Master Gardener" is to be used exclusively when representing the WVU Extension Service in unpaid public service work in an Extension - sponsored program. In such service, only WVU Extension Service approved recommendations may be made. Appearing as a commercial activity, having association with commercial products or giving implied WVU endorsement of any product or place of business is improper.

I wish to become a WVU Master Gardener and would like to be accepted into a training program. I understand that if accepted, I will agree to pay back a minimum of 30 hours of service in Extension programs in my county of residence during the year following my training.

Applicant Signature

Date

Please return this form at your earliest convenience. Please contact us if you have any questions or wish further information. Thank you!

Return to your county Extension Office:

Office Use only	Date received:	Date Approved:
References:		

***The information asked for in this form will be used solely to determine how you can best fit into West Virginia University Extension Service programs. It is understood that no discrimination is implied.*

Programs and activities offered by West Virginia University Cooperative Extension Service are available to all persons without regard to race, color, sex, disability, religion, age, veteran status, political beliefs, sexual orientation, national origin, and marital or family status. Issued in furtherance of Cooperative Extension work, Acts of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture, Director, Cooperative Extension Service, West Virginia University.