

APPLICATION MASTER GARDENER PROGRAM



I wish to be accepted into the Virginia Cooperative Extension Master Gardener Training program, beginning Tuesday, January 12, 2010. By signing below, I agree that within one (1) year of completing the Master Gardener training, I will volunteer fifty (50) hours of public service to the Virginia Cooperative Extension Office (VCE) in Halifax County, Virginia. Of those fifty hours, no less than 20 hours will be volunteered working in the VCE Office answering citizens' inquiries on the Extension Helpline.

Signed: _____

Date: _____

Name: _____

Address: _____

City: _____ State: VA Zip Code: _____ - _____

County: _____ Home Phone: () _____ Work Phone: () _____

Email Address: _____

No Application will be accepted after the close of business on December 18, 2009. Only 15 applicants will be selected. Individuals selected will be notified by letter/email. You will be required to pay the \$140.00 fee for training materials and supplies no later than December 21, 2009. **(Couples in the class that require only one manual will be charged \$160.00)** All training classes will be morning sessions, 9:30 a.m. – 12:00 noon, at the Halifax Extension Office Conference Room, 171 South Main Street, Halifax Virginia. Classes will meet every Tuesday from January 12, 2010 until May 4, 2010. There are two planned field trips during the 2010 course. Upon completion of your 50 hour first year commitment, \$50.00 will be refunded to you.

- (1) Describe your personal experience or interest in gardening.
- (2) Describe any training, experience, or special interest that you have in particular fields of horticulture (Vegetable Gardening, landscaping, foliage plants, floral design, etc.)
- (3) Describe any volunteer experience you have had working with the community (schools, churches, halfway houses, senior citizens, youth, parks, conservation, etc.) These experiences need not be horticulture.

(4) Do you have skills in non-horticulture areas that you would volunteer to support the Master Gardener program? Check any of the examples below that apply to you. Also, list other skills you possess. Almost any skill can be useful to the program.

Lettering Sign making Writing Photography
 Public Speaking Management Carpentry Public Relations
 Computer Skills Secretarial Counseling Teaching
 Radio/TV experience

Other: _____.

(5) Are you interested in working with people? Yes No
If yes, check which group you are most interested in.

General Public Low Income Youth
 Minority Senior Citizens Disabled
 Other (specify) _____

(6) When are you available to volunteer for Master Gardener activities? (A Master Gardener has one year to fulfill their (50) hour volunteer commitment.
Check all that apply.

Flexible Weekday business hours Weekends
 Evenings Spring Summer
 Fall Winter

(7) Why do you wish to become a Master Gardener?

(8) How did you learn about the Master Gardener program?

Complete & mail to: Virginia Cooperative Extension
P.O. Box 757
Halifax, VA 24558-0757
Or send via email to: wmccaleb@vt.edu

APPLICATION DEADLINE: DECEMBER 18, 2009

If you are a person with a disability and desire any assistive devices, services or other accommodations to participate in this activity, please contact William McCaleb, Master Gardener Coordinator, at the Halifax Extension Office, 434/476-2147/TDD) during business hours of 8:00 a.m. and 5:00 p.m. to discuss accommodations 5 days prior to the event. *TDD number is (800) 828-1120.*

Extension is a joint program of Virginia Tech, Virginia State University, the U.S. Department of Agriculture, and state and local governments Virginia Cooperative Extension programs and employment are open to all, regardless of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, or marital or family status. An equal opportunity/affirmative action employer.