



## Application to Become an University of Wisconsin - Extension Master Gardener Volunteer

The main purpose of the Master Gardener (MG) training class is to prepare you to be an educator and extender of horticulture to the local community. In exchange for the training made possible through UW-Extension, and to become a Master Gardener Volunteer (MGV), you are required to complete volunteer service after the training.

The following steps are required to become a MGV:

- Complete the Master Gardener Volunteer Application Form.
- Complete the background check prior to the classroom training.
- Complete and sign the Volunteer Agreement prior to the classroom training.
- Pass a written examination.
- Complete a minimum of 24 hours of volunteer service within one year of completion of the classroom training.

To remain a Certified Master Gardener Volunteer in subsequent years there are annual volunteer and continuing education commitments (24 hours service and 10 hours continuing education).

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I would like to become a Master Gardener Volunteer, representing UW-Extension, and request acceptance into the MG volunteer training program offered through my local county UW-Extension office.

Name (print) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
County \_\_\_\_\_  
Phone (home) \_\_\_\_\_  
Phone (work) \_\_\_\_\_  
E-mail \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return this application to the address listed on the accompanying letter.**

## MG Program Application

**Please answer the following questions** so we can match your talents to our volunteer needs. No experience is required, we simply want to know what your interests are. *Use another sheet of paper, if necessary.*

Why do you wish to become a Master Gardener? Are there any goals or ideas that you hope to accomplish or work toward as a Master Gardener Volunteer?

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Please describe any special training, classes or experiences you've had in gardening/ horticulture.

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Give us an idea of the scope of your gardening experiences (backyard, farming, community gardens) and also list areas of specialization or hobby (flowers, herbs, vegetables, pruning, etc.)

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Please list and explain in some detail your volunteer or work experience with the community (schools, churches, senior citizens, youth, hospitals, halfway houses, etc.). Also list any group affiliations with garden clubs or service organizations.

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Please list special skills that you can offer the MG program (such as computer skills, record keeping, public speaking, leadership, public relations, photography, artwork, construction etc.).

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How did you learn of the Master Gardener program?

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Families, individuals, and organizations trust the University of Wisconsin-Extension to provide quality leadership and care for those who are involved in Extension-sponsored programs. The opportunity to work as a volunteer with UW-Extension is a privileged position that should be held only by those who are willing to demonstrate behaviors that fulfill this trust.

All UW-Extension volunteers are required to complete the UW-Extension Youth Protection program. This includes: 1) a background check for arrest and conviction records, 2) participation in a volunteer orientation program, and 3) signing the Volunteer Behavior Expectations form. The primary purpose of this process is to ensure the safety and well-being of all participants (i.e., youth, adults, salaried and volunteer staff).

UW-Extension volunteers are expected to abide by the following behavior standards established by UW-Extension and to conduct themselves as positive role models for program participants. All UW-Extension volunteers are ultimately accountable to UW-Extension for their UW-Extension related activities.

**As a UW-Extension volunteer, I will:**

- Cooperate with and support UW-Extension staff to jointly further the mission of the UW-Extension.
- Accept supervision and guidance from UW-Extension staff or designated management volunteers.
- Conduct myself in a manner that is in the best interest of program participants and UW-Extension and will not use the volunteer position or title for purposes of private or personal gain.
- Use appropriate University research based resources/information.
- Make all reasonable efforts to ensure that programs are accessible to all individuals regardless of race, color, sex, creed, disability, religion, national origin, ancestry, age, sexual orientation, pregnancy, marital or parental status.
- Abide by all local, state and federal laws and UW-Extension and U.S.D.A. rules, policies and guidelines.
- Conduct myself with courteous manners and language, exhibiting good sportsmanship, serving as a positive role model, treating others with respect, and demonstrating reasonable conflict resolution skills.
- Not consume or be under the influence of alcohol or illegal substances while in the role of a UW-Extension volunteer, nor allow youth participants under my supervision to do so.
- When transporting youth or adults, operate motor vehicles and other equipment in a safe and reliable manner and only with a valid operator's license and the legally required insurance. I will comply with all motor vehicle-related state regulations and laws.
- Treat animals in a humane manner and teach program participants to provide appropriate animal care and management.
- Report suspected verbal, sexual, physical abuse and neglect of youth to local authorities.
- Not conceal carry firearms and/or weapons while acting in a volunteer role. I understand that if I am a 4-H Youth Development shooting sports volunteer, I am expected to openly carry/transport 4-H shooting sports equipment in designated areas.
- Immediately notify my county UW-Extension Educator/Agent of any changes with my status (e.g. contact information, criminal arrest, charge or conviction history, driving privileges, etc.)

I have read and understand and agree to abide by these expectations for volunteers. I understand that suspension or termination of my position as a volunteer will result if I do not meet these expectations.

\_\_\_\_\_  
Volunteer Printed Name

\_\_\_\_\_  
County

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
The county UW-Extension office receives one signed copy and the volunteer receives one copy.



