2017 York County Master Gardener Volunteer Application

This application is also available on-line at:
https://extension.umaine.edu/forms/county-offices/york-county/master-gardener-application-form/

In order to become a certified University of Maine Master Gardener Volunteer, I understand that I must attend at least 80% of the sessions AND complete a minimum of 40 hours-approved volunteer internship. Applicants not willing/able to complete 40 hours of volunteer time by December 31st 2017, should not apply.

If I am accepted into the training program, I understand that as a Master Gardener Volunteer I am considered a representative of the University of Maine and I will abide by all regulations and recommendations and conduct myself according to the standards of behavior of the University of Maine Cooperative Extension.

I have reviewed and understand the:
MG Volunteer Program Policy ___Yes ___No
Volunteer Standards of Behavior ___Yes ___No

Signature__________________________________________ Date________________________

Name (please print) ____________________________________________________________

Mailing Address _____________________________________________________________

City/Town/State ____________________________________________________________ Zip________

Home Phone _____________________________________ Cell Phone ______________________

E-mail (required) ______________________________

PLEASE PRINT CLEARLY OR TYPE

Please feel free to attach extra pages to this application as needed. Include your name on attachments.

DO NOT ATTACH OR SEND PICTURES

1. Have you applied for the York County Master Gardener training in the past? ___Yes ___No If yes, what year? ______________________

2. Have you previously participated in a Master Gardener Program in Maine or another state? ___Yes ___No If yes, indicate where and in what year(s). ______________________

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3. Why do you wish to become a Master Gardener Volunteer? (Really think about this question and consider the contributions you would like to make to the community.)

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4. I have reviewed the list of Ongoing Community Projects. ___Yes ___No. With the understanding that 30 of the first year’s 40 hours of required volunteer time must be in one or more of our Ongoing Projects, please explain how you plan to use what you have learned from the Master Gardener Volunteer training.

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5. List two areas related to gardening where you would like to be proficient so you may educate others.

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6. Please briefly describe your horticulture interests, experience, and training (formal & informal).

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________________________________________________________________________________

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7. Do you currently work in any area of horticulture or the green industry?  _____Yes    _____No
   If yes, please explain: _____________________________________________________________
   ____________________________________________________________________________

8. Are you affiliated with any gardening clubs or horticulture-related groups?
   _____Yes    _____No  If yes, which ones? ____________________________________________
   ____________________________________________________________________________

9. What type(s) of volunteer work have you done? Briefly describe your history (include volunteer role and
   time frame) as a volunteer.  (Consider areas such as school, Red Cross, youth sports, scouting, 4-H,
   public committees, non-profit work, church, or service groups.)  If you do not have any volunteer
   experience, please explain the circumstances that prevented you from volunteering
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

10. Do you agree to undergo a criminal background check at the expense of UMaine?  (This process may be
    necessary especially when working with children or as a Garden Angel)?  _____Yes    _____No

11. I have included the required current letter of reference.  (Limit one per applicant.  Letters cannot be
    from a spouse, partner, or family member.  The letter should be from someone who can speak to
    your commitment to volunteering.)  Your application is not complete until your letter of
    reference has been received in the office.
   _____Yes    _____No  If no, why not? _____________________________________________

Complete and return this form to:
UMaine Extension – York County/MG Program
21 Braden Street, Suite 302
Springvale, ME 04083

DEADLINE: Tuesday, January 17th, 2017
Applications, with Letter of Reference, will be accepted on this day until 4:30 p.m.