July 18, 2018

Dear Master Gardener Extension Volunteer Applicant:

The purpose of the Georgia Master Gardener® Extension Volunteer (MGEV) program is to assist UGA Extension by training volunteers to provide current research-based information on horticulture to the community. Clayton County Extension has an active corps of MGEVs who share their knowledge with the community by serving as community garden coaches; providing gardening presentations to the public; and assisting the Clayton County Extension Agriculture and Natural Resources team in the Extension office.

Clayton County Extension is recruiting individuals to join the 2019 MGEV Training Program. Clayton County collaborates with Henry County and Spalding County to offer the South Metro Master Gardener Extension Volunteer Training Program. From January 7, 2019 through March 25, 2019, classes will take place on Mondays from 9:00 a.m. until 4:00 p.m. Classes will be held at the Extension offices in Henry and Spalding counties.

Attached are the Master Gardener Volunteer Memo of Understanding, 2019 Master Gardener Volunteer Program Application, and Screening Application. All forms need to be completed and returned to the Clayton County Extension Office. Applicants must pass a background investigation to be accepted into the program. The program fee is $120.00. Applicants should make their check or money order payable to Clayton County Extension. A few partial scholarships are available. If you would like to be considered for a scholarship, please note that on the application. All applications must be received by 5:00 pm, Wednesday, October 31, 2018 to be considered. Incomplete and/or late applications will not be considered.

Clayton County Extension encourages candidates to fill out the application as thoroughly as possible. The selection committee, comprised of Extension personnel and veteran Master Gardener Extension Volunteers, reads all applications. Selection criteria include: demonstrated volunteer experience and gardening interest, knowledge, and experience. Clayton County Extension may call applicants for an interview.

Clayton County Extension will notify selected applicants in December. At that time, Clayton County Extension will deposit your check. If you are not selected for the 2019 Georgia MGEV Training, your check will be shredded or mailed back to you.

Please return the completed application to:

    UGA Extension/Clayton County * ATTN: Master Gardener Training Program * 1262 Government Circle, Suite 40 * Jonesboro, Georgia 30236

The Georgia Master Gardener® Program offers many opportunities to make friends and enhance your horticultural expertise, while becoming involved in fulfilling community service activities. We look forward to receiving your application! If you have any questions, please contact our Clayton County Master Gardener Extension Volunteer Program at 770-473-5435, weason@uga.edu, or 770-473-5434, hortpa@uga.edu.

extension.uga.edu

AGRICULTURE AND NATURAL RESOURCES • FAMILY AND CONSUMER SCIENCES • 4-H YOUTH

An equal opportunity/affirmative action institution
I am a Clayton County resident and would like to be considered for the Master Gardener Extension Volunteer Training Program. I understand I am required to attend at least 80% of the training sessions. Two excused absences are allowed. I must also receive passing grades of 70% on the midterm and final exams.

In order to receive Master Gardener certification, I agree to complete a minimum of 50 volunteer hours from an approved Clayton County Master Gardener Extension Volunteer project list, 30 hours of which will be in the County Extension office. This volunteer work may include answering gardening questions from clients who call the Extension office or walk in, computer work, research, copying, etc. during normal Extension business hours from 8:30 a.m. - 4:30 p.m., Monday through Friday. During the other 20 hours of volunteer time, I will collaborate with fellow Clayton County Master Gardener Extension Volunteers on approved projects. I agree to maintain and log a monthly record of my volunteer hours, contacts, and mileage in MGLOG, our online database, by the last day of each month. To remain certified in subsequent years, I must complete 25 hours of service annually from the approved educational project list in my County.

The fee for the 2019 MGEV Training Program is $120.00. The check or money order should be made payable to "Clayton County Extension" and submitted at the time of the application. Clayton County Extension does not accept credit cards at this time. This fee covers basic program costs including a badge, class supplies, guest speaker honorariums, the Georgia Master Gardener Handbook and other supplemental references. This fee does not include lunch. I will be responsible for bringing my own lunch for the lunch break at each class. If Clayton County Extension does not select me for the 2019 training, the office will return my check to me or shred it. I understand Clayton County Extension will not provide refunds after December 15, 2018.

The Georgia Master Gardener® status is acquired only after successful completion of the volunteer training program and 50 hours of volunteer service. I agree I will not use the Georgia Master Gardener® title for any commercial publicity or private business purposes. Participating in a commercial activity, associating with commercial products, or giving implied Master Gardener, UGA, or UGA Extension endorsements to any product or place of business is in violation of the Georgia Master Gardener® program policy. I acknowledge that I have read the above guidelines and will abide by them.

Signature of Applicant ___________________________ Date ________________
2019 CLAYTON COUNTY MASTER GARDENER EXTENSION VOLUNTEER PROGRAM APPLICATION

Name: ______________________________ Date of Application: __________________
County: ______________

Preferred Method of Contact (if accepted) phone/email:
________________________________________________

What are your present occupation and/or family responsibilities? Describe your time constraints. Please include which days and hours you work. Would you be available to volunteer on nights or weekends?

Please indicate times available to do volunteer work:

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Below, rate your preference for types of volunteer work (1 least preferred; 5 most preferred):

1  2  3  4  5

Telephone/office work at County Extension office
Teaching small groups
Teaching large groups
Teaching children/teens
Teaching adults/senior citizens
Teaching persons w/disabilities & special needs
Farmers Market Ask-a-Master-Gardener clinic
Writing articles for newsletter/newspaper
Public relations/publicity
Coaching community gardeners
Photographing plants/horticultural activities

Please list any previous volunteer work you have done. Specify organization, type of work and dates:
Please briefly describe your previous professional history.

If accepted into the Master Gardener Program, what is your greatest area of gardening interest and how would you like to translate that into education and outreach as an Extension volunteer?

In which of the following areas are you knowledgeable? Please check all that apply:

- Vegetable gardening
- Flower gardening
- Herb gardening
- Trees/shrubs
- Native plants
- Wildlife gardening
- Houseplants
- Lawns & turf grass
- Plant propagation
- Other (Please Specify): _______________________________________________________________________

Please list any volunteer group affiliations and how long you have been involved: (e.g., garden clubs, professional or hobby associations, plant specialty societies, civic clubs, etc.)

What horticultural experience or training have you had? (credit or non-credit courses, workshops, etc.)

How long have you been a gardener?
2018 CLAYTON COUNTY MASTER GARDENER EXTENSION VOLUNTEER PROGRAM APPLICATION

Why do you wish to become a Master Gardener?

Do you possess any of the following skills or expertise that could help strengthen our program? Please describe your experience with any of the following:

- Writing
- Public Speaking/Teaching
- Computers/Technology
- Organizing events or projects
- Organizing people
- Advertising and public relations
- Other (Be Creative)
On this page, write three to five paragraphs on a gardening topic. For example, write about your favorite plant, your favorite vacation, a gardening experience or a book that you would like to share with others. Be creative and feel free to write about any educational gardening topic you think would be of interest to others.
Would you like to be considered for a partial financial scholarship for the 2019 Clayton County Master Gardener Extension Volunteer training program?

If so, please provide just a few sentences describing your financial need.
SCREENING APPLICATION

Last Name: _________________________ First Name: ____________________________ Middle: __________________________
Address: _________________________________________________________________________________________
City: __________________________________________________________________________ State: __________ Zip: ____________

Information Collected for Reporting Purposes Only:

Birthdate: ____________ Gender: ___ Male ___ Female

Race (select all that apply):
___ White
___ African American or Black
___ American Indian or Alaskan Native
___ Asian
___ Native Hawaiian or Other Pacific Islander

Residence (select one):
___ Farm
___ Rural (Under 10,000)
___ Town (10,000 – 50,000)
___ City (50,000+)

Check all that apply:
___ Hispanic or Latino
___ Military Family

Contact Information:

Phone: _________________________ Work Phone: _________________________
Cell Phone: __________ Email: ____________________________________________

References: Provide 3 references who are not immediate family members and who reside outside of your home address. They should be familiar with your skills and abilities related to potential duties associated with volunteering. Local CAES or Extension staff should not serve as references.

Name of Reference: _________________________ Title: _________________________ Company: _________________________ Phone No: _________________________
Address: _________________________ Email: _________________________
How do you know this reference? _________________________ How long have you known this reference? _________________________

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Address: _________________________ Email: _________________________
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Address: _________________________ Email: _________________________
How do you know this reference? _________________________ How long have you known this reference? _________________________

Thank you for your interest in serving with UGA CAES and Extension! Please look over your application prior to submitting it to your local office to ensure you are leaving no required boxes or blanks empty.