



Master Gardener Extension Volunteer Educational Activity Report

(To be completed by committee chair or project coordinator only)

I. BASIC INFORMATION

Program/Activity/Event Title: _____

Chair/Coordinator _____

Lecture Title(s): _____

(if a presentation was given)

Location: _____

Start Date: _____ End Date: _____

II. GENERAL CONTACT INFORMATION

Audience Demographics (if known):

	Male	Female
White		
Black		
Asian		
American Indian		
Pacific Islander		
Multi-Racial		
Hispanic		
TOTAL		

Audience Totals	
Youth	
Homeowner	
Total Contacts Face-to-Face	

Phone Contacts	
Written Contacts	

III. PROGRAM LENGTHS

Hours of instruction per participant (formal teaching time):	
Number of sessions or classes taught	
Total length of program (teaching & non-teaching time)	
Total adult volunteers participating in activity	
Total volunteer hours worked (all volunteer hours combined)	



IV. VALUE AND COMMENTS

In-Kind support (\$ value, if known):	Funds Donated (\$ value, if any):
---------------------------------------	-----------------------------------

Comments:

V. Volunteers involved with activity & hours worked (use another sheet if more space is needed):

NAME	HOURS	NAME	HOURS

Return to Extension office a copy of this EAR form and any of the following (check what you have included):

- ☐ Publicity for the program i.e. copy of news articles, letters sent, promo brochures, etc.
- ☐ Sign-in sheet
- ☐ Evaluation forms
- ☐ Copies of materials distributed
- ☐ Follow up articles or reports
- ☐ Other supporting information _____
- ☐ Comments that will be helpful in future programs

**For Office Use Only:

____ Entered in MGLOG on ____/____/____

____ Entered in Georgia Counts on ____/____/____