

WASHINGTON STATE UNIVERSITY



LEWIS COUNTY EXTENSION

Master Gardener Program

17 SW Cascade Ave,
Chehalis, WA 98532-1900
(360) 740-1216

Web site <http://lewis-mg-mrc.org>

WSU Master Gardener Volunteer Application

I wish to become a WSU Master Gardener volunteer and would like to be accepted into the Washington State University Extension training program. I understand that in order to participate in the WSU Master Gardener Program, I will be expected to attend all training sessions and commit a minimum of 60 hours of volunteer service. I also understand that I will be a volunteer staff member of WSU Extension, and as such, I will do my best to offer WSU approved recommendations and advice. I agree to become familiar with, and abide by, WSU Extension policies regarding my conduct as a Master Gardener volunteer.

Extension programs and policies are consistent with federal and state laws and regulations on nondiscrimination regarding race, sex, religion, age, color, creed, national or ethnic origin; physical, mental or sensory disability; marital status, sexual orientation, or status as a Vietnam-era or disabled veteran. Evidence of noncompliance may be reported through your local Extension office.

Please print or type:

Legal Name _____
Last First Middle

I prefer to use the nickname _____ Home Phone _____

Mailing Address _____ Work Phone _____

Street Address _____

City _____ E-mail _____

State _____ ZIP _____

Do you have special needs (e.g. hearing, mobility, diabetic, heart condition, etc.) while participating in the training or which would limit your activities as a Master Gardener volunteer? Please list and indicate type of assistance needed or restrictions on activities.

Transportation: Have use of a car Rely on others Use public transportation

Please give the name of person(s) who should be contacted in case of emergency:

(1) Name _____ Relationship _____

Address _____ Phone _____

(2) Name _____ Relationship _____

Address _____ Phone _____

Training/Education: Please check levels you have achieved.

Elementary Jr. High High School Years of College & Areas of Study _____

Post Graduate Degree _____

Continuing Education/Advance Studies _____

Work Status: Please indicate your current work status or expected work status for the coming year:

Full-time Part-time Shift work Self-employed Student Retired Unemployed

Work, Educational or Volunteer Experience: List current or most recent experience first:

<u>Employer or Organization</u>	<u>Position Title or Volunteer</u>	<u>Years</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Subject Matter Background: List any additional training, experiences, specialization, or skills related to gardening, horticulture, botany, environmental science, composting, recycling, etc.

Society, Professional or Organizational affiliations: _____

Additional Skills, Interests or Experience: We sometimes need special skills or talents to enhance the quality of our volunteer programs. Please check the items below which will add to your effectiveness as a WSU Extension volunteer.

- | | | |
|--|---|--|
| <input type="checkbox"/> Graphics, illustration, artwork | <input type="checkbox"/> Grant writing | <input type="checkbox"/> Public relations, marketing |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Public speaking, teaching | <input type="checkbox"/> Secretarial experience |
| <input type="checkbox"/> Woodworking or other crafts | <input type="checkbox"/> Writing, editing newsletters | <input type="checkbox"/> Bookkeeping experience |
| <input type="checkbox"/> Librarian skills | <input type="checkbox"/> Historian skills | <input type="checkbox"/> QuickBooks version ____ |

Other hobbies or interests: _____

Computer access and skills: Much of the training and some of the research required to serve Master Gardener Plant and Insect Clinic clients requires the use of a computer.

- Do you own a computer? _____
If yes, do you have high-speed internet access? _____
Do you own a Mac or PC?
If you own a PC, what operating system are you using? Windows XP Windows 7 Windows 8 Other _____
- Are you familiar with the computer and comfortable using it to search for information? _____
- If you do not own a computer or have dial-up connection to the internet, are you willing to access a computer at a public library or at the Lewis County Extension office during business hours? _____
- If you do not know how to use a computer at this time, are you willing to work with a Master Gardener training partner or someone else knowledgeable about computers to access the training information? _____

Working with youth: In your Volunteer Educator role, with whom do you prefer to work? Please check all that apply:

Elementary age youth Teens Adults Any

If you prefer to work directly with youth, what grade level(s) do you prefer? Please check all that apply:

Primary (K-2) Junior (Grades 3-5) Intermediate (Grades 6-8) High School (Grades 9-12)

Languages: if you are able to speak, read, or write a language other than English, please list below:

Language: _____ Speak fluently Read Write Interpret

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Language: _____ Speak fluently Read Write Interpret

Why do you want to become a Master Gardener?

How did you hear about this volunteer program? _____

Have you ever been an extension volunteer? Yes No If yes, which program and when: _____

Where: _____
City County State

Training Program Information:

Master Gardener training sessions, including off-site tours, are held on the third Tuesday of each month from 9 a.m. to 4 p.m. from January to November. Can you attend all of the sessions? Yes No

Are there days or times you know you will not be available for training or volunteer service during the year (e.g. job, vacation, other commitments)? List dates if known:

Are there any volunteer activities in which you are unwilling or unable to participate (public speaking, office work, working one-on-one with plant clinic clients, physical work in demonstration gardens, etc.)? If yes, please list:

Can you, and are you willing, to volunteer 60 hours throughout the training year and do you plan to complete recertification requirements each year thereafter to retain the title of "Certified Master Gardener"?

Yes No - If no, please explain:

Please accept my application to become a WSU Master Gardener.

Signature _____ Date _____

The attached form must be completed and returned with this application form. They include:

- (1) Applicant Criminal History Disclosure Form

Applications may be mailed to:

Jason Adams c/o WSU Extension Master Gardeners
351 NW North Street
Chehalis, WA 98532

For questions or additional information, contact Jason Adams at (360) 740-1216 or e-mail jason.adams@lewiscountywa.gov.

Master Gardener Volunteer Code of Conduct

Washington State University Extension appreciates your commitment to share your knowledge and experience with the Master Gardener program and trust that this partnership will be mutually fulfilling during the time you serve in this capacity.

WSU Extension Master Gardener Volunteer Expectations are in place to insure the safety and well-being of all participants. A volunteer's involvement in Master Gardeners is a privilege and a responsibility and the Volunteer will (indicate your required acceptance of the following by initialing each statement):

- _____ **Represent WSU Master Gardener program with dignity and pride.**
- _____ **Treat others in a courteous, respectful manner, and serve as a positive role model for our community.**
- _____ **Abide by policies and guidelines of WSU Extension and the Lewis County Master Gardener programs as outlined in the WSU Master Gardener Program Handbook and Statewide Policies and Procedures for Program Coordinators and Volunteers (MISC0570E).**
- _____ **Promote a spirit of inclusion and a welcoming environment for all volunteers.**
- _____ **Accept supervision and feedback from the Program Coordinator and Extension Director and work collaboratively with Extension staff and all Master Gardener volunteers.**
- _____ **Uphold an individual's right to dignity, self-development and self-direction**
- _____ **Will not abuse any participant physically or verbally and will report such abuse, if observed.**
- _____ **Refrain from harassment, bullying, retaliation, divisiveness, profanity, and disruptive or other harmful behavior.**
- _____ **Operate machinery, vehicles and other equipment in a safe and responsible manner.**
- _____ **Handle fundraising and finances in an ethical manner.**
- _____ **Refrain from using alcohol and other drugs in an illegal or inappropriate manner.**
- _____ **Comply with equal employment opportunity and nondiscrimination laws.**

I have read and agree to abide by the above expectations. I understand and agree that any action on my part that contradicts any portion of this agreement is grounds for termination of my volunteer status with the WSU Master Gardener Program of Lewis County.

Print Name _____

Signature _____ Date _____

WSU Extension Master Gardener Volunteer Pest Management Recommendations Agreement

Protection of the environment and human health concerns everyone. In order to reduce the misuse of pesticides and to promote safe and effective pest management methods, Washington State University (WSU) Extension Master Gardeners are required to subscribe to the following policies. This agreement will serve as a formal basis for Master Gardener involvement in pest management recommendations.

1. I understand that as a WSU Extension Master Gardener my pest management recommendations must be limited to home, lawn, and garden problems. Questions concerning commercial crop production, commercial pest management, aquatic weed management, and pesticide liability are to be referred to the county Extension Educator.
2. I understand that as a WSU Extension Master Gardener, I may only recommend a chemical for home and garden pest management if that use has been recommended by WSU. WSU Recommendations of chemicals registered for home and garden use only are contained in Hortsense and current WSU Extension publications. All pest or crop/site uses listed on a pesticide label are not necessarily recommended by WSU.
3. I understand that as a WSU Extension Master Gardener, I may **only** recommend biological control organisms or other non-chemical alternatives for home and garden pest management if the recommended use is contained in current WSU Extension publications or other publications recognized as credible by WSU Scientists.
4. I understand that as a WSU Extension Master Gardener, I will provide both chemical and non-chemical pest management recommendations allowing the client a choice of strategies.
5. I understand that pesticides must be applied with care and only to plants, animals, or sites listed on the label and recommended by WSU. When mixing and applying pesticides, all label precautions must be followed to protect the applicator, other persons, and the environment. It is a violation of law to disregard label directions. If there is any apparent conflict between label directions and the pesticide uses suggested by WSU publications, the county Extension Educator must be consulted.
6. I understand that as a Master Gardener, I am not required to be a licensed pest management consultant to recommend pesticides registered for home and garden use only. I further understand that my completion of WSU Extension Master Gardener training is not equal to pesticide licensing.
7. I understand that as a WSU Extension Master Gardener, I am considered a volunteer representative of WSU. Therefore, WSU will assume liability for my pest management recommendations, but **only** if my recommendations are limited to management measures that are both recommended by WSU for home and garden use and listed in the WSU Extension publications or other WSU-approved pest management references.

_____ **Yes, as a WSU Extension Master Gardener, I will subscribe to the above requirements.**

_____ **No, I cannot subscribe to the above policy, and I understand that I therefore cannot be certified as a WSU Extension Master Gardener.**

Signature _____ Date _____

Print Your Name _____

County _____

Program Coordinators: Please keep signed copies of these agreements at your local Extension office.

PHOTO RELEASE FORM

I hereby grant permission to Washington State University to use my photographic and/or video likeness taken during any WSU Extension Master Gardener event or anywhere I am representing WSU Extension Master Gardener Program as a Trainee, Intern, or Certified Master Gardener Volunteer, by any means and without limit for education, demonstration, and promotional purposes. I further understand any picture or video sequence may be used in WSU brochures, publications or websites.

Subject Signature

Date

Parent/Guardian signature (if subject is a minor)

Date

WSU Extension Master Gardener Volunteer Position Description

Title WSU Master Gardener Volunteer

Purpose To provide public education in gardening and environmental stewardship based on researched-based information from WSU Extension and other universities to address such critical issues as enhancing natural resources and environmental stewardship, sustaining vibrant communities, and improving health and wellness of residents of Washington.

Nature & Scope WSU Master Gardener Volunteers make it possible for Extension faculty and staff to reach more people with horticulture programs and home gardening information than would be possible without them.

Trained and certified WSU Master Gardener Volunteers provide educational programs, free advice and answers to questions on home gardening and landscape maintenance, pest management, composting, and related topics. This is accomplished through various formal and informal activities, including plant clinics, telephone or personal contacts, demonstrations, classes, written material, school programs, demonstration gardens, public meeting, tours, etc.

Requirements Be able to participate fully in the training program provided for WSU Master Gardener Volunteers.
Be willing and able to return a county-specific number of public educational service hours within a predetermined timeframe.
Be willing to follow the WSU Master Gardener policies and procedure, including record keeping requirements and responding to reasonable requests for volunteer service.
Be willing to abide by WSU Extension's Pest Management Recommendation Agreement, giving clients a range of possible options, including cultural, mechanical, biological, and chemical controls.
Be able to communicate effectively with the public by telephone, personal contact; group contact, or through written language.
Have knowledge of and experience or skills in basic gardening or other horticulture related areas.
Be able to work with adults and/or youth, and be willing to share home gardening information with others.

Supervision The Extension staff in charge of the county WSU Master Gardener Program oversees and coordinates the activities of Master Gardener Volunteers. In some locations, Master Gardener organizations with an official relationships with WSU Extension assist county staff in program administration.

Technology Requirements and Computer Experience:

Trainees should have at least some previous computer experience and feel comfortable navigating the Internet and using email. They also need access to a computer for extended periods. Some trainees may be more comfortable working together in small groups during the first few modules while becoming familiar with the program. MG staff might consider assigning computer-savvy mentors to assist trainees who are less familiar with computers.

TECHNOLOGY MINIMUM REQUIREMENTS	
Internet connection	Cable Internet or DSL recommended
Windows Operating System minimum requirements	Windows 7 or greater/Vista 800-MHz or faster 32-bit (x86) or 64-bit (x64) processor 1 GB of RAM
Windows browser requirements	Download the most recent version of Google Chrome , Firefox , Microsoft Internet Explorer , or Safari (free downloads) Note: Please ensure that all popup blockers are configured to accept popups from https://learn.wsu.edu , or disable them.
Macintosh Operating System minimum requirements	Mac OS X 10.6 Intel Core™ Duo 1.83GHz or faster processor 1 GB of RAM
Macintosh browser requirements	Download the most recent version of Google Chrome , Firefox , or Safari (free downloads) Note: Please ensure that all popup blockers are configured to accept popups from https://learn.wsu.edu , or disable them.
Media hardware	USB connection for thumbdrive
Media software	Flash Player (download) Adobe Reader (download) Java (download)
You may also need any of the following players	Real Player* (download) Windows Media Player (download) QuickTime (download) *When using RealPlayer, firewalls might cause problems that require reconfiguring settings. If you are connecting to the Internet via AOL, MSN, Earthlink, Sympatico, Mindspring, Netcom, Sprynet, Compuserve, Prodigy Internet, or another common internet service provider (ISP), you should not need to configure RealPlayer for use with a firewall.