**PCMG PROGRAM OPERATIONS FORM**

For programs, workgroups, and committees\*

**WORKGROUP OPERATIONS FORM**

**Workgroup name:**

**Program you function under:**

**Purpose statement (1-2 sentences):**

**Minimum of two (2) objectives:**



**Identify at least one (1) program priority (see page 5 of the MG Handbook for reference):**

Horticulture Skills   
 Clean Water   
 Water Conservation   
 Wildlife Preparedness

Local Food

Pollinators

Climate Change

Plant Biodiversity

Soil Health

Nearby Nature

**Does this workgroup have an MG as lead, or does it utilize a collective leadership structure?**

MG Lead

Collective leadership

**Lead(s), if applicable:**

|  |  |  |
| --- | --- | --- |
| **First and last name** | **Phone with area code** | **Email** |
|  |  |  |
|  |  |  |

***Please attach a copy of any operational forms or documents that your workgroup uses***

**Date first submitted:**      **/**     **/**      **Submitted by:**

**Most recent update:**      **/**     **/**      **Updated by:**

**NOTES** (please include any major updates to the document):