K-State Research and Extension - Shawnee County
Master Gardener Program Application (Please Print All Responses)

Name

Master Gardener Mission Statement: Improving our Community through Horticulture.

Master Gardener Values: Knowledge, Learning, Common Passion & Interests, Community Service, Personal Growth, Pride and Fun.

PROGRAM INFORMATION AND GUIDELINES

- Possess a high school diploma or equivalent and a broad interest in horticulture.

- Complete the basic 40 hour SCEMG Training Course. Training is from 9:00am – 4:30pm on eight Thursdays beginning in September. You are expected to attend all of the training sessions. Because of the amount of information covered, it is important to attend all of the classes. If you miss more than 2 full days of class, you will need to start the class again the following fall.

- The year after you complete the course (2020) is considered your In-Training year. During this time you are expected to complete 40 hours of volunteer work with Master Gardener Advisory Board approved projects. Of those 40 hours, 20 are dedicated to handling response line calls when the response line is active from April – September. In addition, you need to obtain 6 units of Advanced Master Gardener training, attend 4 SCEMG business meetings, and participate in 1 SCEMG Fundraiser.

- Be willing to communicate research-based information from K-State, even if it includes the use of pesticides or other chemicals.

- Read and sign the Pest Management Information Policy.

- Read and sign the SCEMG Volunteer Agreement and Code of Conduct.

- Read and sign the Requirements for Master Gardeners.

- Once you have successfully completed your In-Training year, to continue as an active Master Gardener, annually, you will need the following: 25 hours of volunteer hours, 6 units of Advanced Training, attendance at 4 SCEMG business meetings and participation in 1 SCEMG Fundraiser.

How did you hear about the Extension Master Gardener program?

Are you acquainted with any active Shawnee County Extension Master Gardeners?

___Yes Name(s) ____________________________________________

___No
TIME AVAILABILITY

Employed Full Time: _______  Employed Part Time: _______  Retired/Not Employed: _______

Will your employment or other regular commitments allow you to be available to participate in the Basic SCEMG Training Course and in required volunteer hours?

GARDENING EXPERIENCE/TRAINING

Please list training, courses, or class experience you have had on gardening and/or environmental issues (75 words or less).

Check area(s) of interest or experience (personal or professional):

__ Annuals  __ Ornamental Grasses
__ Composting  __ Photography
__ Community Gardening  __ Power Point
__ Conservation
__ Edibles (Fruit, Veg.)  __ Pollinators
__ Educational Reading  __ Public Speaking
__ House Plants  __ Technology
__ Landscaping  __ Trees/Shrubs
__ Lawn Care  __ Writing and Editing
__ Native Plants  __ Youth Education
__ Other (Please explain) _________________________
Discuss your reason(s) for wanting to join the SCEMG program - what is your “why”? (150 words or less)

Describe one idea you have for an educational horticulture program that would have a substantial positive impact on our community: (200 words or less)
COMMITMENT

Thank you for your interest in the SCEMG program and for completing this application. It will be carefully considered by Extension staff and designees.

- SCEMG are volunteers through K-State Research and Extension. Volunteers represent K-State and are considered unpaid university staff.
- SCEMG operate under the guidance of trained Extension professionals responsible for monitoring their performance and the progress of their continuing education.
- SCEMG are expected to provide gardening advice based on research-based information, and to provide educational program assistance in support of the general county Extension education program.
- SCEMG volunteers **may not** participate in the Shawnee County Extension Master Gardener program for financial gain or for commercial credentials, recommendations or endorsements. Such behavior may result in removal from the organization.

I wish to become a SCEMG Trainee and agree to abide by the qualifications for acceptance and continued commitment including 40 hours of volunteer time in the first year and other commitments as described in the Program Information and Guidelines for the Extension Master Gardener Program.

I understand there is a participation fee of $120.00 due the first day of class to cover class materials and expenses.

Name (print): _________________________________________
Address: ____________________________________________
City, Zip Code: _______________________________________
County You Reside In: _________________________________
Preferred contact number: _____________________________
Secondary contact number: _____________________________
E-mail: ______________________________________________

Note: The majority of Extension Master Gardener communication occurs by e-mail.

Signature: ____________________________________________
Date: ________________________________________________

Mail to: Shawnee County K-State Research and Extension
         1740 SW Western Avenue
         Topeka, Kansas 66604-3052
         Attention: Lesley Hayward

E-mail to: lhaywardksu.edu
Fax to: 785-232-0093

Please indicate which pre-acceptance orientation session you will be attending:

- August 6, 2020 9:00 AM to 11:00 AM  ❑
  Extension Meeting Room upstairs

- August 6, 2020 5:00 PM to 7:00 PM  ❑
  Extension Meeting Room upstairs

Note: Write this date on your calendar.

FOR OFFICE USE ONLY:

Name for internal directory: ____________________________

Significant other: _________________________________
   Include their name in directory? Y/N

If preferred contact number is a cell number do you want to include Texting (T) in directory? Y/N

Kansas State University is committed to making its services, activities and programs accessible to all participants. If you have special requirements due to a physical, vision, or hearing impairment, please contact Shawnee County Extension at 785.232.0062. K-State Research and Extension is an equal opportunity provider and employer.