



# Virginia Cooperative Extension

Virginia Tech • Virginia State University

www.ext.vt.edu

Virginia Cooperative Extension programs and employment are open to all, regardless of age, color, disability, gender, gender identity, gender expression, national origin, political affiliation, race, religion, sexual orientation, genetic information, veteran status, or any other basis protected by law. An equal opportunity/affirmative action employer. Issued in furtherance of Cooperative Extension work, Virginia Polytechnic Institute and State University, Virginia State University, and the U.S. Department of Agriculture cooperating. Edwin J. Jones, Director, Virginia Cooperative Extension, Virginia Tech, Blacksburg; M. Ray McKinnis, Administrator, 1890 Extension Program, Virginia State University, Petersburg.

## MASTER GARDENER TRAINING APPLICATION 2019 Hampton, Gloucester, Newport News, York/Poquoson

**APPLICATION DEADLINE: August 1, 2019**

Thank you for your interest in the Master Gardener program!

Please choose your course preference by checking the appropriate box:

<input type="checkbox"/> <b>Day Training Course</b> <i>September 3 – November 13, 2019</i> <i>Tuesdays and Thursdays 9am until Noon</i> <i>plus 3 Saturdays</i> Dr. Martin Luther King, Jr. Community Bldg. at Charles Brown Park, 1950 Old Williamsburg Rd., Yorktown 23690	<input type="checkbox"/> <b>Night Training Course</b> <i>August 14 - November 13, 2019</i> <i>Wednesday evening classes 6:15pm – 7:45pm</i> <i>plus 3 Saturdays</i> Courthouse Way Community Center 14302 Old Courthouse Way, Newport News 23602
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**Early Signup Class Course Fee is \$150 by June 1<sup>st</sup>. After June 1<sup>st</sup>, Course Fee is \$160.** (Course fee for two students in the same household sharing book is \$250 by June 1<sup>st</sup> and \$260 after.)

Please complete the attached application and the skills and interest questionnaire and submit them along with a check to your respective unit at the addresses below.

The textbook is now available in a print or digital version. Cost is the same for either one. Please indicate your preference.  Print  Digital

### NOTICE: RETURNED CHECK FEE IS \$50

#### GLOUCESTER

Attention: Gloucester Master Gardeners  
c/o VCE-Gloucester  
PO Box 156  
Gloucester, VA 23061  
**\*check payable to: VCE-Gloucester**  
804 693-2602

#### NEWPORT NEWS

Attention: Newport News Master Gardeners  
c/o VCE-Newport News  
739 Thimble Shoals Blvd., Suite 1009  
Newport News, VA 23606  
**\*check payable to NNMGA**  
757 591-4838

#### HAMPTON

Attention: Hampton Master Gardeners  
1919 Commerce Dr., Suite 340  
Hampton, VA 23666  
**\*check payable to: Hampton Master Gardeners**  
757 727-1401

#### YORK/POQUOSON

VCE-York/Poquoson  
PO Box 532  
Yorktown, VA 23690  
**\*check payable to: VCE-York/Poquoson**  
757 890-4940

**NOTE:** Course workload (both courses) is equivalent to 50-60 class hours plus preparation time.

#### Training Course Policies:

- All classes should be attended, except as prearranged or for medical reasons. Alternative methods are available to make up any missed classes.
- Tests are open book.

If you have any questions, contact the training chair in your respective unit:

Bill Blair - Gloucester; Janet Rash – Newport News; Loye Spencer – Hampton; or Bethany Beck – York/Poquoson

**If you are a person with a disability and desire any assistive devices, services or other accommodations to participate in this activity, please contact your local Extension Office at 757-890-4940/TDD\* during business hours of 9:00 a.m. and 4:00 p.m. to discuss accommodations 5 days prior to the event. \*TDD number is (800) 828-1120.**



# Virginia Cooperative Extension

Virginia Tech • Virginia State University

## Extension Master Gardener Volunteer Application

VCE Unit Name: \_\_\_\_\_ Application Year: \_\_\_\_\_

Unit Address: \_\_\_\_\_

Applicant Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

A. Contact Information	
Address (Street, City, State, Zip)	
Home Phone	Cell Phone
Work Phone	Email Address
Emergency Contact Name	
Emergency Phone (Day)	Emergency Phone (Evening)

B. Voluntary Disclosure
<p>This information will be kept in a confidential manner and accessible only to authorized personnel. A "yes" answer does not automatically exclude you from volunteering for this unit of the Virginia Cooperative Extension Master Gardener Volunteer Program.</p> <p>Have you ever had any criminal convictions including moving traffic violations? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If "yes" to any question above, please describe:</p>          <p>I understand that criminal background screenings or reference checks may be conducted on me at any time during the application process or during volunteer service of Virginia Cooperative Extension (VCE).</p> <p>Signature _____ Date _____</p>

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C. Availability	Please mark an "X" to indicate the days and times below that you are available for volunteer work.			
	Weekdays		Weekends	
	A.M.	P.M.	A.M.	P.M.
January - March				
April - May				
June - August				
September - October				
November - December				

D. Other Volunteer Experience
1.
2.
3.
4.
5.

E. Memberships in Horticultural or Conservation Organizations
1.
2.
3.
4.
5.

F. References
1. Name _____ Phone _____ Relationship _____
Address _____ Email _____
2. Name _____ Phone _____ Relationship _____
Address _____ Email _____

**G. Media Release Statement**

The Virginia Polytechnic Institute and State University/College of Agriculture and Life Sciences (CALs) periodically uses electronic and traditional media (e.g., photographs, video, audio footage, testimonials) for publicity and educational purposes. By my signature on this form, I acknowledge receipt of this document and give permission to the College of Agriculture and Life Sciences and its designee to use such reproductions for educational and publicity purposes in perpetuity without further consideration from me.

I understand that I will need to notify Virginia Tech/College of Agriculture and Life Sciences if any changes to my situation occur that will impact this media release permission.

PLEASE INITIAL: Yes  No

**H. Enrollment Agreement**

I am volunteering my time to further the educational purposes of Virginia Cooperative Extension (VCE). I agree to abide by all policies and procedures of VCE. I understand that VCE programs and employment are open to all, regardless of age, color, disability, gender, gender identity, gender expression, national origin, political affiliation, race, religion, sexual orientation, genetic information, veteran status or any other basis protected by the law. An equal opportunity/affirmative action employer. I hereby certify that all of the entries on this application are true and complete. I understand that any falsification of information herein constitutes cause for dismissal.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**I. Demographic Information (optional; for record keeping purposes only)**

- |  |   |
|--|---|
| <p>1. Gender</p> <p>___ Female</p> <p>___ Male</p>   | <p>2. Ethnicity</p> <p>___ Hispanic</p> <p>___ Not Hispanic</p>   |
| <p>3. Race</p> <p>___ African American</p> <p>___ American Indian</p> <p>___ Asian</p> <p>___ Caucasian (white)</p> <p>___ Other</p> | <p>4. I live:</p> <p>___ On a farm</p> <p>___ Rural area or town under 10,000 population</p> <p>___ Town or city of 10,000 to 50,000 population</p> <p>___ Suburb or city over 50,000 population</p> <p>___ City over 50,000 population</p> |
5. Highest level of education: \_\_\_\_\_

**VCE Internal Use Only**

Date volunteer application received: \_\_\_\_\_

Date of interview: \_\_\_\_\_

Date of background screening: \_\_\_\_\_

Application requires further action: Yes  No

Applicant met qualifications? Yes  No

Date acceptance letter sent \_\_\_\_\_

Date rejection letter sent \_\_\_\_\_

Signature, VCE Representative \_\_\_\_\_ Date \_\_\_\_\_



Name: \_\_\_\_\_ Date: \_\_\_\_\_

Unit: \_\_\_\_\_

## INTERESTS & SKILLS QUESTIONNAIRE

On this page, please indicate any of your particular interests and skills. Your responses will help us match you with Extension Master Gardener (EMG) projects.

How did you hear about the local Extension Master Gardener Program? (optional)

Why do you want to become a VCE-MG volunteer? (optional)

Please check any of these topics that interest you:

Animals/Gardening for habitat	Annuals	Arts & crafts
Bees/butterflies/insects	Birds	Botany
Bulbs/corms/rhizomes	Composting/organics	Design
Disease/pest management	Edibles/vegetables	Flower arranging
Greenhouse	Herbs	Working with at-risk youth
Houseplants/tropical plants	Maintenance landscape	Native plants
Perennials	Photography	Propagation
Pruning	Publicity	Roses
Sales/raffles/fundraising	Shade plants	Shrubs & trees
Soils	Travel/tours	Turf care/establishment
Water/bog gardens	Water quality	Website/computer work
Woodworking/displays	Writing	Xeriscaping
Other plant specialties (write in below – bonsai, African violets, orchids, daylilies, iris, camellias, maples, etc.)		

What description best suits you? (Check one)

- Beginning gardener  
 Experienced gardener  
 Professional horticulturist or government employee  
 Specialty gardener (i.e., orchids, roses, vegetables), please list: \_\_\_\_\_

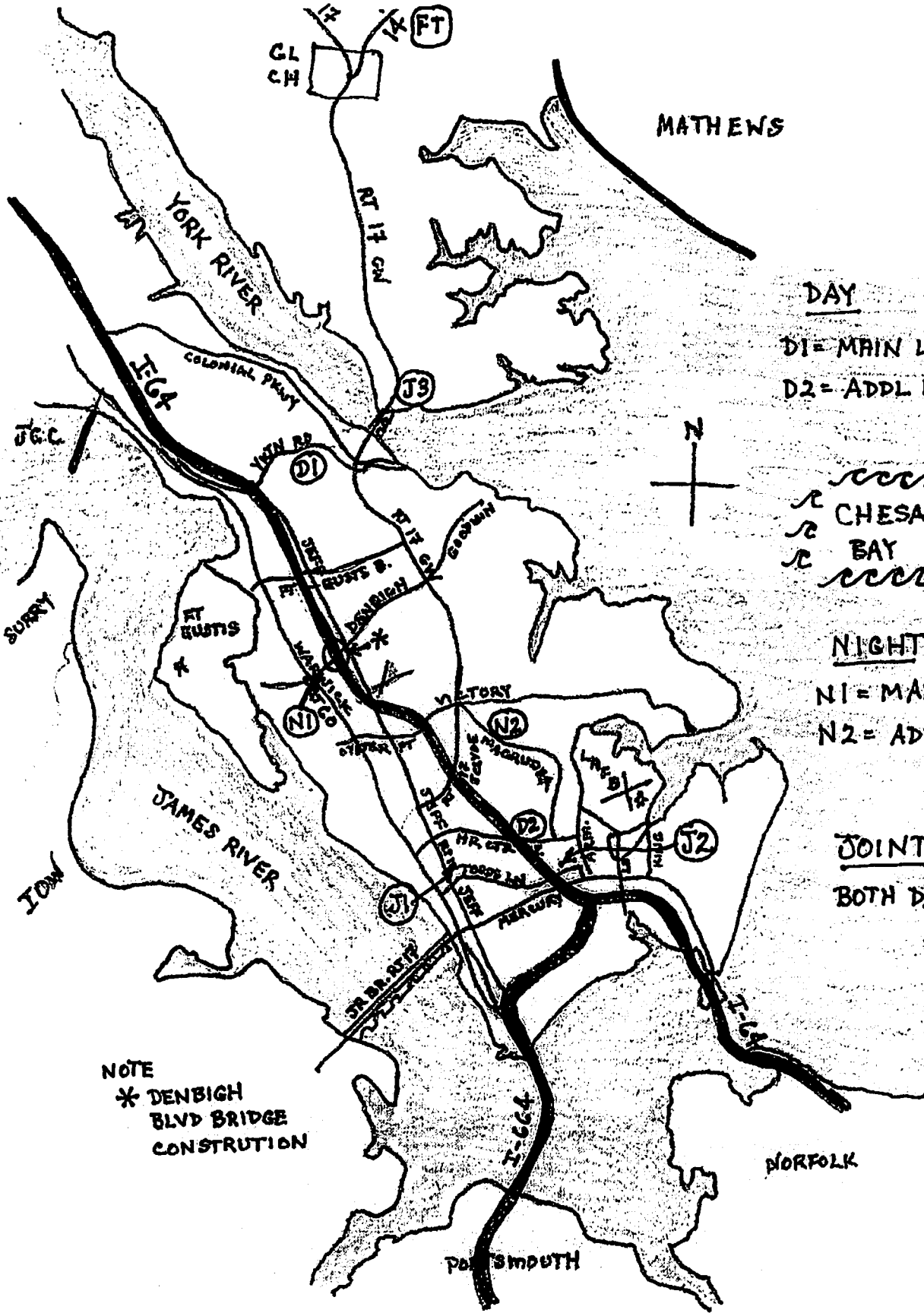
Please list any specialized gardening skills/knowledge or areas in which you have interest (ex: xeriscaping, water gardening, organic vegetable gardening, etc.):

**OTHER SKILLS/INTERESTS:** (place a check next to all that apply)

Computer Proficiency		Business	
<input type="checkbox"/>	I don't use a computer	<input type="checkbox"/>	Finance/auditing
<input type="checkbox"/>	I use a computer for email only	<input type="checkbox"/>	Marketing/advertising
<input type="checkbox"/>	Some familiarity with computers	<input type="checkbox"/>	Program management
<input type="checkbox"/>	Extensive use of computers	<input type="checkbox"/>	Catering
<b>Computer Skills</b>		<b>Event Planning</b>	
<input type="checkbox"/>	Data entry	<b>Training and Leadership</b>	
<input type="checkbox"/>	Desktop publishing	<input type="checkbox"/>	Teaching
<input type="checkbox"/>	Web design/management	<b>Leading groups (scouts, etc.)</b>	
<input type="checkbox"/>	Microsoft Word	<b>Leadership training</b>	
<input type="checkbox"/>	Microsoft Excel	<b>Public speaking</b>	
<input type="checkbox"/>	Microsoft Access	<b>Language</b>	
<input type="checkbox"/>	Microsoft PowerPoint	<b>Other language spoken:</b>	
<input type="checkbox"/>	Microsoft Publisher	<b>Comfort in conducting programming in this language:</b>	
<input type="checkbox"/>	Other:		
<b>Arts and Publication</b>			
<input type="checkbox"/>	Videography		
<input type="checkbox"/>	Digital photography		
<input type="checkbox"/>	Scrapbook design		
<input type="checkbox"/>	Graphic design		
<input type="checkbox"/>	Writing		
<input type="checkbox"/>	Editing		
<input type="checkbox"/>	Proofreading		

Signature: \_\_\_\_\_ Date: \_\_\_\_\_





DAY

D1 = MAIN LOC.  
D2 = ADDL LOC.

CHESAPEAKE BAY

NIGHT

N1 = MAIN LOC.  
N2 = ADDL LOC.

JOINT 1, 2, 3  
BOTH DAY + NIGHT

NOTE  
\* DENBIGH  
BLVD BRIDGE  
CONSTRUCTION

LOCATION ADDRESSES ON REVERSE

# 2019 MG Training Locations

- D1**      **Charles Brown Park**  
Dr. Martin Luther King, Jr, Community Center  
1950 Old Williamsburg Rd, Yorktown VA 23690
- D2**      **Sandy Bottom Nature Park**  
1255 Big Bethel Rd, Hampton VA 23666
- N1**      **Courthouse Way Community Center**  
14302 Old Courthouse Way, Newport News VA 23602
- N2**      **Tabb Library**  
100 Long Green Blvd, Yorktown VA 23693
- J1**      **Brittingham Midtown Community Center**  
570 McLawhorne Drive, Newport News VA 23601
- J2**      **Northampton Community Center**  
1435 Todd's Lane #A, Hampton VA 23666
- J3**      **Virginia Institute of Marine Biology**  
1375 Greate Road, Gloucester Point VA 23062
- FT**      **Brent and Becky's Bulbs**  
7900 Daffodil Lane, Gloucester VA 23061