**Application to Become a University of Wisconsin-Madison Division of Extension Master Gardener Volunteer**

The main purpose of the Master Gardener (MG) training class is to prepare you to be an educator and extender of horticulture to the local community. In exchange for the training made possible through Extension, and to become a Master Gardener Volunteer (MGV), you are required to complete volunteer service after the training.  
   
**The following steps are required to become a MGV:**

* Complete the Master Gardener Volunteer application form. The course fee of $125.00 payable to DCMGA. CHECKS ONLY are due the 1st night of class

After the above has been submitted to the county Extension office you will be given more information about the following:

* Activate an account in the Online Reporting System.
* Sign Volunteer Agreements in the Online Reporting System (Assumption of Risk, Consent to Emergency Treatment, Photo Release, Consent to Uphold Conduct Guidelines).
* Complete online Mandatory Reporting of Child Abuse and Neglect training.
* Complete the criminal background check (information will be emailed directly from UW Human Resources Department staff explaining the process conducted by an outside company).
* Pass a written examination.
* Complete a minimum of 24 hours of volunteer service by the next October 1 after you complete training.

To remain a Certified Master Gardener Volunteer in subsequent years there are annual volunteer and continuing education commitments (24 hours service and 10 hours continuing education). I would like to become a Master Gardener Volunteer, representing Extension, and request acceptance into the MG volunteer training program offered through my local county Extension office.

Name (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_ Zip code \_\_\_\_\_\_\_\_

County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (primary) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Please return this application to the address listed on the last page.**

**University of Wisconsin, U.S. Departments of Agriculture and Wisconsin counties cooperating. UW-Extension provides equal opportunities in employment and programming including Title IX and ADA.**

**MG Program Application**

**Please answer the following questions** so we can match your talents to our volunteer needs. No experience is required, we simply want to know what your interests are. *Use another sheet of paper, if necessary.*

Why do you wish to become a Master Gardener? Are there any goals or ideas that you hope to accomplish or work toward as a Master Gardener Volunteer?

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Please describe any special training, classes or experiences you’ve had in gardening/ horticulture.

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Give us an idea of the scope of your gardening experiences (backyard, farming, community gardens) and also list areas of specialization or hobby (flowers, herbs, vegetables, pruning, etc.)

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Please list and explain in some detail your volunteer or work experience with the community (schools, churches, senior citizens, youth, hospitals, halfway houses, etc.). Also list any group affiliations with garden clubs or service organizations.

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Please list special skills that you can offer the MG program (such as computer skills, record keeping, public speaking, leadership, public relations, photography, artwork, construction etc.).

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How did you learn of the Master Gardener program?

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**Payment Information**

Class fee: $125.00. Please make checks payable to: **DCMGA** the check will be collected the 1st class

Fee includes:

* Wisconsin Master Gardener Program Manual
* All classroom materials
* A name badge after all requirements for certification are met (including volunteer service)

*Refunds minus the $40 application fee will be given if the county Extension office is notified before the first class session. No refunds will be given after the program begins. You will receive a refund minus the $40 application fee if not accepted into the program. Incomplete applications will not be processed.*

**Mail Registration to: DOOR COUNTY EXTENSION**

**421 NEBRASKA ST.**

**STURGEON BAY, WI 54235**

**Deadline for registration is**

**The last Thursday in NOVEMBER**

DOOR COUNTY EXTENSION: 920-746-2260 (M-F 8:00a - 4:30p)