

# MASTER GARDENER APPLICATION

Deadline October 31, 2024

<https://extension.wsu.edu/skagit/mg/apply>

"\*" indicates required fields

## Washington State University Extension Master Gardener Program

The WSU Extension Master Gardener Program is open to individuals interested in becoming volunteers and sharing gardening and horticulture knowledge with the general public through community outreach. Extension Master Gardener volunteers engage with communities to address pressing issues facing today's Washingtonians. Applicants looking to increase their gardening knowledge and who have a demonstrated volunteer ethic or a desire to volunteer will be considered regardless of gardening experience. For details about WSU Extension Master Gardener Program vision, priorities, training, and policies, see the WSU Extension Master Gardener Program Handbook ([https://www.skagitmg.org/wp-content/uploads/member-page/MG\\_Handbook\\_2020\\_.pdf](https://www.skagitmg.org/wp-content/uploads/member-page/MG_Handbook_2020_.pdf)).

**If you have questions** about the application process or the Skagit County Extension Master Gardener Program, please contact Program Coordinator Alex duPont, 360-395-2367 or [alex.dupont@wsu.edu](mailto:alex.dupont@wsu.edu) (<mailto:alex.dupont@wsu.edu>).

### Personal Information

**To become a WSU Extension Master Gardener Volunteer, you must be 18 years of age or older. Are you 18 years of age or older? \***

- Yes
- No

**Name \***

**First**

**Middle**

**Last**

**Nickname**

**What name do you want listed on your name badge? \***

**First**

**Last**

**Address \***

**Street Address**

**City**

**State**

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**ZIP Code**

**Email \***

**Phone (cell preferred) \***

**Phone (other, optional)**

**Best time(s) to call**

**Best phone number to use**

**Emergency Contact Person \***

**Name**

**Relationship**

**Phone \***

List the times you would **NOT** be available for volunteer work: (work schedules, anticipated trips, other commitments)

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**How did you learn about the WSU Extension Master Gardener Program? \***

**Have you been to a WSU Extension Master Gardener clinic or demonstration garden (Discovery Garden)? \***

**Education, Experience, and Skills**

**Training/education completed (add details below) \***

- High school
- Technical/trade school
- 2-year community college
- 4-year college
- Horticulture degrees, training, or certifications

**List major areas of study and specific degrees or certifications**

**Years of horticulture and gardening experience: \***

**Describe your horticulture and gardening experience (any personal, volunteer, or work experience): \***

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**Specific horticulture experience (check all that apply):**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Annuals            | <input type="checkbox"/> Herbs              | <input type="checkbox"/> Propagation         |
| <input type="checkbox"/> Perennials         | <input type="checkbox"/> Houseplants        | <input type="checkbox"/> Greenhouses         |
| <input type="checkbox"/> Roses              | <input type="checkbox"/> Fruit trees        | <input type="checkbox"/> Container gardening |
| <input type="checkbox"/> Lawns              | <input type="checkbox"/> Berries and grapes | <input type="checkbox"/> Insects             |
| <input type="checkbox"/> Ornamental grasses | <input type="checkbox"/> Trees and shrubs   | <input type="checkbox"/> Plant diseases      |
| <input type="checkbox"/> Native plants      | <input type="checkbox"/> Pruning            | <input type="checkbox"/> Weeds               |
| <input type="checkbox"/> Wildlife habitat   | <input type="checkbox"/> Soils              | <input type="checkbox"/> Landscape design    |
| <input type="checkbox"/> Vegetables         | <input type="checkbox"/> Composting         | <input type="checkbox"/> Water gardens       |

**List your affiliations related to horticulture: \***

**List your volunteer experience; be specific about length of service and about your roles and responsibilities (past and/or present, Skagit County and elsewhere): \***

**Other skills, interests, or experience (check all that apply):**

- Computers
- Website development
- Artwork/displays
- Photography
- Drawing/illustrating
- Writing/publishing
- Proofreading
- Marketing/fundraising
- Research/data collection
- Public speaking/teaching
- Languages other than English (Please list below)
- Other (Please list below)

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Please add specifics about the skills checked above. List non-English languages you speak, read, or write, including American Sign Language. Add skills, interests, or experience not listed above:

Why do you wish to become a WSU Extension Master Gardener volunteer? \*

Is there any other information about your skills and abilities you would like us to have?

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### Photo/Video Release

In the event your picture and/or video likeness is taken during a WSU Master Gardener event or anywhere you are representing WSU Extension Master Gardener Program as a Trainee, Intern, or Certified Master Gardener Volunteer, do you give WSU permission for that picture or video likeness to be used in WSU brochures, publications or websites? If you say YES, your likeness may be used by any means and without limit for education, demonstration, and promotional purposes.

- YES - I DO give the above permission
- NO - I DO NOT give the above permission

### Personal References

List non-family members who have knowledge of your skills, abilities, and qualifications. Individuals should have worked with you on projects and activities and/or have direct experience with or knowledge of your qualifications. Please provide email addresses and phone numbers.

#### Reference #1 \*

First Name

Last Name

Relationship \*

Phone \*

Email \*

#### Address

Street Address

City

State

Zip code

SAMPLE FORM ONLINE  
Submit

**Reference #2 \***

**First Name**

**Last Name**

**Relationship \***

**Phone \***

**Email \***

**Address**

**Street Address**

**City**

**State**

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**Zip code**

**Reference #3**

**First Name**

**Last Name**

**Relationship**

**Phone**

**Email**

**Address**

**Street Address**

**City**

**State**

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**Zip code**

SAMPLE FORM Online

Submit

### Authorization to Process Application

***I authorize Washington State University Extension to contact the listed references. I understand that a criminal background check is required prior to being fully accepted as a volunteer in the program. I understand that misrepresentation or omission of required information is just cause for non-appointment as a volunteer with Washington State University Extension. I understand that I serve at the pleasure of the Washington State University Extension and agree to abide by the policies of Washington State University Extension and individual program areas and to fulfill the volunteer responsibilities to the best of my ability.***

**Signature of Applicant \***

**Date \***

### Civil Rights Information

#### The final section of this application is confidential & voluntary

The Washington State University Extension Master Gardener program is part of a land-grant university system. The land-grant university system was built on the principle that all people should have access to education. The WSU Extension Master Gardener program wants to ensure we uphold this principle.

Additionally, WSU Extension and its programs are federally funded and as such are required by the Civil Rights Act to report demographic information for employees, volunteers and community persons who seek our services. Responses will not be used in the selection process. This page will be removed prior to the application being reviewed.

Our goal for collecting this information is to see how well we uphold the land-grant principle of access to education. We summarize the race, ethnicity, and gender of volunteers and of the people we serve to determine how closely WSU Master Gardener programs are to serving all audiences in each county.

*Note: Your name will not be reported in conjunction with your Race, Ethnicity and Gender data. The data is reported as an aggregate to USDA-NIFA and names are never included in the reports. Individually identifiable information will be treated as confidential, is not disclosed without (written) consent, and is not included in the review of application to become an Extension Master Gardener volunteer. Your name is only used to record who has reported and who has not in order to accurately report Race, Ethnicity and Gender data.*

#### What is your gender?

- Male
- Female
- Non-binary
- Gender other or unidentified
- Prefer not to respond

#### What is your ethnicity?

- Hispanic or Latin
- Non-Hispanic or Non-Latin
- Ethnicity unidentified
- Prefer not to respond

#### What is your race?

- White
- Black or African American
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- Asian
- Two or more races
- Race other or unidentified
- Prefer not to respond