

2015 Application

Colorado Master Gardener Volunteer

For Clear Creek County

Full legal name (first, middle, last): _____

Name you go by: _____

E-mail (required):

Are you employed in the Green Industry?

No Yes; what is your job?

Home:

Address: _____

Home Phone : _____

Cell Phone: _____

To apply as a Colorado Master Gardener volunteer, complete entire application, pages 1-7. Payment is not required until acceptance into the program.

To become a *Colorado Master Gardener Volunteer*, you must complete the following:

1. Apply to and be accepted into your local county/area CMG Program.
 - a. The application process includes background checks and reference letters; interviews may be required by some counties.
 - b. If accepted as a CMG Volunteer, pay fees.
2. Course work: Satisfactorily complete the CMG training course with 80% minimum class attendance and completion of homework assignments.
3. Volunteer Service: Continue the learning experience with 50 hours minimum volunteer service in the county/area CMG program by the end of the program year (October 31, 2015).
4. Record volunteer hours and educational training in the Volunteer Management System (VMS) program.

Section 1— Volunteer Experience

Briefly answer the following questions on an attached sheet of paper.

1. Describe your experience in volunteer programs (scouting, hospitals, senior centers, park districts, 4-H, schools, etc.).
2. Describe your experience in communications (electronic media, public speaking, writing, teaching, etc.).
3. Describe your experience working with specific audiences (youth, special needs, senior citizens, etc.).
4. Describe your experience with informal teaching. This includes mentoring, demonstrations, and/or presentations you have done.
5. Why do you want to become a *Colorado Master Gardener*? What do you see yourself doing as a *Colorado Master Gardener*?

Section 2 – Gardening Experience

6. How many years have you been actively gardening? _____
7. How many years have you been actively gardening in Colorado? _____

Briefly answer the following questions on an attached sheet of paper.

8. In one short paragraph, describe one of your gardening successes this past season.
9. In one short paragraph, describe one of your gardening challenges this past season and how you approached it.

10. Describe your areas of gardening expertise you can share with other gardeners.
11. Describe non-gardening related skills/talents that you could share with the CMG organization.
12. List formal education or training you have had in the area of horticulture / home gardening.

Section 3 – Emergency Contact, Photo Release, and Residency

14. Please provide emergency contact information for two individuals:

Name: _____

Relationship: _____

Phone numbers:

Home: _____

Cell: _____

Work: _____

Name: _____

Relationship: _____

Phone numbers:

Home: _____

Cell: _____

Work: _____

15. **Photo release** – Occasionally CMG volunteers may be photographed in CMG activities for use in program documentation and marketing. Photographs may be used in newsletters, newspapers, on web sites, and in other marketing and impact reports.

May we take your picture for program documentation and marketing purposes?

Yes No

16. **Residency**

In what county do you reside?

Since the local CMG program is primarily supported by county tax dollars, priority is generally given to county residents. Volunteer work must be done for and in behalf of the county/area program for which you apply. Applications to multiple programs are not accepted.

If you are applying to a program outside of your county/area of residency, please attach a statement explaining the situation.

Section 4 – Scheduling

17. Check the times that you are generally available for *Colorado Master Gardener* volunteer service. *Note: This does not commit you to any specific dates or times.*

	Daytime	Evenings
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

Other comments about availability: _____

18. Please indicate the type of scheduling notice that fits your lifestyle:

- I need to schedule activities well in advance of the event.
- I am available on short notice, 1-7 days.
- I am available some days for emergency fill-ins.

19. What is your availability for attending the CMG Training Course?

- No conflicts (available for all class sessions)
- Limited conflicts (may be late or leave early some days)
- Moderate conflicts (may miss 1-2 class sessions)
- Major conflicts (may miss more than 2 days)

*Please explain any conflicts you foresee during training.

Section 5 – Volunteer Activity Interests

20. *Colorado Master Gardeners* do a variety of educational outreach activities in the community. The list below includes examples of these activities. Please check areas that you find most appealing.

Note: this does not commit you to any specific project, dates or times. Counties vary greatly in the CMG outreach offered locally. Some projects may be required by the county in which you apply.

- ___ **Phone inquires**
- ___ **Diagnostic Clinic** at the CSU Extension Office – assisting walk-in clients with samples and questions
- ___ **Teach** adult garden-related classes
- ___ **Write** for local newspapers
- ___ **Electronic media** – respond to e-mail inquiries and/or assist with web site development

Informational Booths

- ___ **Clinics** – staff informational and diagnostic clinics out in the community (for examples at garden stores) advising clients on gardening questions
- ___ **Fairs** – assist with county, or community fairs
- ___ **Farmers’ Market** – staff informational booth at local Farmers’ Markets

Community Gardening and Greening

- ___ Mentor a neighborhood group in community gardening/greening activities
- ___ Assist with planning, installation, and maintenance of a CMG demonstration garden or research plot

Youth Activities

- ___ Teach a gardening program in a school
- ___ Mentor a 4-H gardening program
- ___ Mentor a youth group in a community gardening or greening activity
- ___ **Other projects** (please describe)

Section 6 – Reference Information

21. **References** – Please list three people who are familiar with your character as it relates to volunteer work and working with youth and people with special needs. (Do not include family members.) References should have known you for at least two (2) years. Each will be contacted by email and asked to respond to a short questionnaire. All responses will be confidential.

Name: _____

Email address (required):

Street address: _____

City: _____

State & Zip Code: _____

Phone number: _____

Name: _____

Email address (required):

Street address: _____

City: _____

State & Zip Code: _____

Phone number: _____

Name: _____

Email address (required):

Street address: _____

City: _____

State & Zip Code: _____

Phone number: _____

Section 7 – CMG Volunteer Agreement

The intent of the *Volunteer Code of Conduct* is to clarify relationships between the *Colorado Master Gardener Volunteer* and the Colorado Master Gardener Program of Colorado State University Extension. CSU Extension values the service of CMG volunteers and commits to do our best to make the volunteer service a productive and rewarding experience.

In applying to become a *Colorado Master Gardener Volunteers*:

- I understand that the decision to accept me or not accept me as a volunteer is the right of Colorado State University Extension. I understand, that in many counties, more individuals apply than the program can accommodate.
- I understand my acceptance into the Colorado Master Gardener Program commits me to 1) the Colorado Master Gardener Training, and 2) fifty hours minimum community volunteer service in the CMG program during the CMG activity year (ending October 31st, 2015).
- If I do not complete the 50 hours minimum volunteer service by October 31, 2015, I agree to reimburse Colorado State University Extension for the course work at the rate of \$15 per each uncompleted hour, to a maximum of \$500.
- I understand that Colorado State University conducts background checks on all volunteers. A criminal record will not necessarily bar me as a volunteer, but will be considered as it relates to the specifics of the

volunteer work. I understand that if I do not respond to the inquiry regarding background checks, my application will not be processed.

- I understand that volunteering for an organization is a privilege, not a right. If selected as a volunteer, I understand that I serve at the request of Colorado State University Extension and that the request can be withdrawn at any time.

In the capacity of a *CMG Volunteer*:

- I agree to cooperate with and support the local Extension Office staff and volunteers to jointly further the missions and objectives of Colorado State University Extension and the CMG Program.
- I agree to consistently exhibit civility and courtesy in my behavior towards Extension staff, other volunteers, and the public. I recognize that others may think and do things differently than what I personally prefer. When this happens, I will be respectful of their values and perspectives. I will avoid disrupting classes in any manner, including negative comments, side conversations, and excessive personal questions. I will not send inappropriate emails.
- I understand that the title “*Colorado Master Gardener*” may be used only in conjunction with official Colorado State University Extension activities. The title may not be used to build my personal credentials in a non-Extension activity. The title may not be used to associate the Colorado Master Gardener name with commercial products or give implied endorsements of any product or place of business.
- I agree to comply with training, reporting, certification, annual renewal requirements, and other program directives as delineated in CMG GardenNotes #014, *The Colorado Master Gardener Program*, available at www.cmg.colostate.edu.
- I agree to disseminate information without regard to race, age, color, religion, national origin or ancestry, sex, gender, disability,

veteran status, genetic information, sexual orientation, or gender identity or expression.

- I agree to follow state and federal laws and regulations (for example, comply with copyright law and EO policies). I agree to follow the fiscal policies and guidelines of the local Extension office, county, state, and Colorado State University.
- I agree to provide research-based horticultural information endorsed and sanctioned by Colorado State University Extension or other research-based institutions.
- I understand the audience for CMG volunteers is non-commercial home gardeners. I understand that as a Colorado Master Gardener Volunteer it is not my role to advise commercial growers or green industry professionals; but rather to refer commercial clients to the appropriate agents.
- I understand that as a CMG volunteer, I may not give advice that would be considered by the client as legal or medical in nature. I understand that as a CMG volunteer, I do not discuss the following issues: hazard trees (potential tree failure concerns), poisonous plants and mushrooms, medical use of herbs (including growing and use of marijuana), pesticide toxicity, and the misuse of pesticides.
- In relation to pest management, I understand that it is the role of the CMG Program to provide clients with appropriate non-chemical and chemical alternatives; allowing the client to choose what method works best for him/her. Any reference to the use of organic and synthetic pesticides (insecticides, fungicides, herbicides, etc.) must come directly from Extension print materials. All inquiries beyond the scope of Extension print materials will be referred to the Extension Agent. I understand that I do not discuss or make comments about the toxicity of organic or synthetic pesticides. Any inquiry about pesticide toxicity will be referred to the *National Pesticide Information Center*.

- I agree to refrain from using or possessing alcohol, marijuana, or illegal substances while participating in volunteer activities. Being under the influence of alcohol, marijuana, or illegal substances during CMG service may result in termination as a CMG volunteer.
- I agree to provide my own transportation and pay my own expenses incurred as part of official volunteer activities. Expenses may be tax deductible with proper documentation (consult a tax advisor). CMG training and continuing education operates on a cost recovery mode. Counties cover this with fund raising activities, annual dues, and/or fees for specific classes.
- In support of continuing education and the general program operations, I agree to pay Annual CMG Fees, as assessed by the state and my local county program.
- I understand that the CMG email communication system (VMS) and membership lists are for internal business use only. I will not use it for commercial business or send spam type communications.
- As non-paid staff, I understand that I am not covered by CSU worker's compensation or other medical insurance.
- I understand that volunteering for an organization is a privilege, not a right. I understand that I serve at the request of Colorado State University Extension and that the request can be withdrawn at any time.

I further understand that Colorado State University Extension will:

- Provide opportunities for my continual learning through volunteer activities, classes and workshops, and online learning opportunities.
- Provide training, supervision, equipment, and direction to volunteers through the local Extension office.
- Communicate expectations and responsibilities of the program to volunteers.
- Uphold and cultivate a respectful relationship between staff and volunteers.
- Provide access to CSU Extension reference materials and professionals.
- Provide a safe working environment within the Extension office and at CMG events.
- While serving in an official CMG capacity (preapproved by the local agent/CMG Program Leader), the University covers CMG volunteers with University liability insurance provided that the volunteer uses research based information and applies good judgment.
- Match volunteer skills and interests with volunteer opportunities within the local program.

22. I accept and agree to follow the CMG Volunteer Code of Conduct as listed above.

- Yes
- No

Section 8 – OPTIONAL – Lower Income Scholarship at \$85 course fees

The *Colorado Master Gardener Program* offers scholarships based on household income (as outlined in the table below) reducing the CMG fees to \$85; numbers are based on the federal income eligibility guidelines. The number of scholarships available in a county is limited. Awarding of scholarships is based on CMG selection criteria.

<u>Household Size</u>	<u>Gross Annual Income</u>
1	\$21,590
2	\$29,101
3	\$36,612
4	\$44,123
5	\$51,634
6	\$59,145
7	\$66,656
8	\$74,167

- I apply for a CMG Reduced Fee Scholarship, certifying that my gross annual household income falls at or below the rate indicated in the table.

Section 9 – Signature

The information that I have provided may be verified by contacting persons or organizations named in the application, and I hereby release from liability any person or organization that provides information concerning me to the representatives of Colorado State University Extension.

In signing this application, I affirm that the information I have given herein is true and correct.

Signed: _____

Date: _____