



Chesterfield Master Gardener Volunteer Application

*Please print this form, complete the information in its entirety.
Mail applications to the Chesterfield VCE office at P.O. Box 146, Chesterfield, VA 23832*

Applicant First Name: _____ **Last Name:** _____

Application Year: _____

A. Contact Information <i>(please print)</i>		
Address (Street, City, State, Zip)		
Home Phone	Cell Phone	Do you use text messaging? Y/N
Work Phone	Email Address	
Emergency Contact Name		
Emergency Phone (Day)	Emergency Phone (Evening)	

B. References		
1.	_____	_____
Name	Phone	Relationship
_____	_____	
Street, City, State, ZIP	Email	
2.	_____	_____
Name	Phone	Relationship
_____	_____	
Street, City, State, ZIP	Email	

C. Availability				
Please mark an "X" to indicate days/times 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				

Please note that Chesterfield County VCE-MG training is held once a year, in February through March and meets every Monday, Wednesday and Friday from 9:30 a.m. to 12:30 p.m. for 9 weeks.

H. Interests & Skills Questionnaire

It takes many people with diverse skills to run the all units of the Virginia Extension Master Gardener program. We are ALL volunteers. On this page, please indicate any of your particular interests and skills by answering the following questions.

1. How did you hear about the Chesterfield County Master Gardener Program? (Check all that apply)

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Friends or family | <input type="checkbox"/> Past participant in Master Gardener Programming | <input type="checkbox"/> Chesterfield County or Virginia Tech Website | <input type="checkbox"/> Social Media Post (Facebook, etc) |
| <input type="checkbox"/> Referral from a Master Gardener | <input type="checkbox"/> Previous Member of a Master Gardener Group | <input type="checkbox"/> Poster at Chesterfield County Library | <input type="checkbox"/> Extension Newsletter |
| <input type="checkbox"/> Traditional Advertising (newspaper, television, magazine, radio) | | <input type="checkbox"/> Other (please specify) _____ | |

2. Why do you want to become a Master Gardener volunteer?

3. What description best suits you? (check one)

- Beginning gardener
 Experienced gardener
 Professional horticulturist
 Specialty gardener (i.e., orchids, roses, vegetables), please list: _____

3. Help us to help you succeed in the Master Gardener Program by ranking all the topics below according to your level of interest (10 = very interested, 5 = somewhat interested, 0 = no interest):

<input type="checkbox"/> Animal/Gardening for habitat	<input type="checkbox"/> Annuals	<input type="checkbox"/> Arts & crafts
<input type="checkbox"/> Bees/butterflies/insects	<input type="checkbox"/> Birds	<input type="checkbox"/> Botany
<input type="checkbox"/> Bulbs/corms/rhizomes	<input type="checkbox"/> Composting/organics	<input type="checkbox"/> Design
<input type="checkbox"/> Disease/pest management	<input type="checkbox"/> Edibles/vegetables	<input type="checkbox"/> Flower arranging
<input type="checkbox"/> Greenhouse	<input type="checkbox"/> Herbs	<input type="checkbox"/> Working with at-risk youth
<input type="checkbox"/> Houseplants/tropical plants	<input type="checkbox"/> Demonstration garden maintenance	<input type="checkbox"/> Native plants
<input type="checkbox"/> Perennials	<input type="checkbox"/> Photography	<input type="checkbox"/> Propagation
<input type="checkbox"/> Pruning	<input type="checkbox"/> Publicity	<input type="checkbox"/> Roses
<input type="checkbox"/> Office management	<input type="checkbox"/> Shade plants	<input type="checkbox"/> Shrubs and trees
<input type="checkbox"/> Soils	<input type="checkbox"/> Travel/tours	<input type="checkbox"/> Turf care/ establishment
<input type="checkbox"/> Water/bog gardens	<input type="checkbox"/> Water quality	<input type="checkbox"/> Website/computer work
<input type="checkbox"/> Woodworking/ Displays	<input type="checkbox"/> Writing	<input type="checkbox"/> Xeriscaping
<input type="checkbox"/> other plant specialties (write in below - bonsai, African Violets, orchids, daylilies, iris, camellias, maples, etc.)		

4. Please list any specialized gardening skills / knowledge (xeriscaping, water gardening, organic vegetable gardening, etc.):

5. Below are some descriptions volunteer opportunities that Master Gardener's do for their community. Please check off as many opportunities that are potentially of interest to you.

- Answering a homeowner's questions at our Master Gardener Help Desk
- Promoting Master Gardener programming and events at a farmer's market or fair
- Conducting a site evaluation at a client's home and helping them assess their lawn or landscape growing conditions
- Writing a gardening article for a local paper or our newsletter using research based information
- Coordinating an educational event for the public such as a seminar or tour of a local garden
- Presenting a garden related topic for a ½ hour to full hour talk at a local library or for a garden club
- Interacting with children through a horticultural educational activity
- Maintaining a demonstration garden of vegetable growing practices for the public
- None of these are of interest to me.

I. Other Skills/ Interests

Please circle your skills and list proficiency in the following areas (examples of areas that could be addressed are provided)

<u>Computer Proficiency</u>	
<input type="checkbox"/>	I don't use a computer
<input type="checkbox"/>	I use a computer for email only
<input type="checkbox"/>	Some familiarity with computers
<input type="checkbox"/>	Extensive use of computers
<input type="checkbox"/>	Other:
<u>Computer Skills</u>	
<input type="checkbox"/>	Data entry
<input type="checkbox"/>	Desktop publishing
<input type="checkbox"/>	Web design/management
<input type="checkbox"/>	Microsoft Word
<input type="checkbox"/>	Microsoft Excel
<input type="checkbox"/>	Microsoft Access
<input type="checkbox"/>	Microsoft PowerPoint
<input type="checkbox"/>	Microsoft Publisher
<input type="checkbox"/>	Social Media (Facebook, etc.)
<input type="checkbox"/>	Other:
<u>Arts and Publication</u>	
<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

<u>Business</u>	
<input type="checkbox"/>	Finance/auditing
<input type="checkbox"/>	Marketing/advertising
<input type="checkbox"/>	Program management
<input type="checkbox"/>	Catering
<input type="checkbox"/>	Event Planning
<input type="checkbox"/>	Meeting Coordination
<input type="checkbox"/>	Other:
<u>Training and Leadership</u>	
<i>For any previous experiences, list age of clientele, group name, and group size</i>	
<input type="checkbox"/>	Teaching
<input type="checkbox"/>	Leading groups (scouts, etc.)
<input type="checkbox"/>	Leadership training
<input type="checkbox"/>	Public speaking
<u>Language</u>	
<input type="checkbox"/>	Other language spoken:
<input type="checkbox"/>	Comfort in conducting programming in this language:

J. Demographic Information (Optional; for record keeping purposes only)

- Gender
 Female Male
- Ethnicity
 Hispanic Not Hispanic
- Race
 Caucasian (white)
 African American
 American Indian
 Asian
 Other
- I Live:
 On a farm
 Rural area or town under 10,000 population
 Town or city of 10,000 to 50,000 population
 Suburb or city over 50,000 population
 City over 50,000 population
- Highest level of education: _____

-----For VCE Internal Use Only-----

Date Volunteer Application received by VCE:	_____
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 _____