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Nassau County Extension Office

543350 U.S. Highway #1

 Callahan, FL 32011

 Tel. (904) 530-6351

rljordi@ufl.edu

 http://nassau.ifas.ufl.edu/

ITEM 2

**2018 FLORIDA MASTER GARDENER APPLICATION**

**Please type or print legibly**

1. NAME: Mr. Mrs. Ms.

2. ADDRESS:

3. CITY ZIP CODE:

4. HOME PHONE: WORK PHONE:

5. EMAIL:

6. Are you currently employed? YES NO Occupation:

7. Have you applied for Master Gardener training before? YES NO

8. If yes, when? Where:

9. Do you own a PC? YES NO

10. What software packages do you use regularly and have proficiency using?

MS Word\_\_\_\_\_\_\_\_ Excel\_\_\_\_\_\_ PowerPoint\_\_\_\_\_\_\_

Others, please specify only those applications in which you demonstrate proficiency.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Do you check email: daily\_\_\_\_\_\_\_\_\_\_\_\_

weekly\_\_\_\_\_\_\_\_\_\_\_\_

several times daily\_\_\_\_\_\_\_\_\_\_\_

rarely\_\_\_\_\_\_\_

12. Describe your personal garden and landscape.

13. Please list any specialized gardening interests or hobbies you have (such as vegetables, houseplants, ornamentals, lawn care, landscaping, bonsai, etc.)

14. Please list any specialized skills which can be used in the Master Gardener program, e.g., publicity, construction, grant research/writing, irrigation systems, etc.

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15. What gardening affiliations do you have (Garden Clubs, Horticultural Societies, etc.)?

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16. Have you ever been active in other type organizations (Cancer Society, Civic Club, Scouts, PTA, Athletic Associations, etc.)? YES NO

17. Do you do volunteer work currently for any organization? YES NO

18. If yes, please list them:

19. Please review the list below of Master Gardener activities and identify at least 5 you can commit to doing during your first year. Remember, we reserve the right to make the final determination of which areas you will be assigned based on the skills of each of our Master Gardeners.

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Work in the demonstration gardens (weeding, planting, watering, fertilizing, pruning, propagating)
* Write articles for the newsletter or newspaper
* Work with children – school enrichment, community gardens, Junior Master Gardener
* Office work (answering phones, clerical work)
* Give presentations (civic groups, garden clubs, schools)
* Write grants
* Fundraising – plant sales
* Program set up/clean up (hospitality)

20. Do you have any physical restrictions preventing you from working in the Demonstration Garden? NO YES Please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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21. We are very pleased you are interested in the Master Gardener Program. There are many reasons why individuals want to be a part of this effort. Please take a few minutes to tell us what your interest may be by placing a check in the blanks applying to you.

 I will have the opportunity to receive useful training.

 I will become a part of the University of Florida/IFAS.

 I will have the opportunity to share my knowledge with other gardeners.

 I will gain practical experience to help me get a job.

 I may be given a raise/promotion at my job for attending.

 I will be able to provide a service to other people in my community.

 I can get a tax credit for my volunteer work.

 I will receive free instruction and materials.

 I will be able to increase my knowledge in the area of gardening.

 I will gain a great deal of personal satisfaction.

 I will be able to creatively use my free time.

 I have the time to give to volunteer work and like to volunteer.

 I will be recognized by people in my community.

 I will be able to gain new skills as a gardener.

 I will be able to add this to my resume.

 I want to compare the information I receive in the Master Gardener

 training with my ‘tried and true’ gardening practices.

23. Other reasons not mentioned:

24. In a few short paragraphs tell us about the last 30 years of your life. You may use the back of this paper if you wish.

**Thanks for taking the time to tell us about you.**

**This application is due back by Friday, July 27, 2018 no later than 5pm.**

**Mailing Address:
Nassau County Extension 543350 US Hwy 1, Callahan, FL 32011- 6486 or email: rljordi@ufl.edu Phone: (904) 530-6351**