



**MACOMB COUNTY MSU EXTENSION
 MASTER GARDENER VOLUNTEER
 TRAINING PROGRAMS
 2009**

The **Master Gardener Volunteer Training Program** is a leader-training program made up of people who want to learn more about horticulture and are willing to share their knowledge with others. Participants are asked to complete a minimum of 40 hours of volunteer work related to the education of others on horticultural and environmental issues. This volunteer work is considered an essential compliment to the classroom training. We will support you in your volunteer efforts, knowing that this helps you grow as a gardener and also helps us to reach more Macomb County residents with current, accurate gardening information. If you have questions regarding the program, please call Sandra Goeddeke-Richards, Horticulture Program Coordinator, at (586)469-6440 or goeddek2@msu.edu

**The Winter-Spring 2009
 Macomb MSUE MASTER GARDENER
 PROGRAM will be held on
 Thursdays from 9:00 am to 1:00 pm.
 January 15, through March 26, 2009 .**

**The Fall 2009
 Macomb MSUE MASTER
 GARDENER PROGRAM will be held on
 Wednesday evenings from 6:00 to 10:00 pm.
 September 9, through November 18, 2009.**

**Classes will be held in the Assembly Room of the VerKuijen Building located at 21885 Dunham Road, Clinton Twp, MI 48036. Applications will be taken on a first come first served basis. Enrollment is limited, so apply early.
 Cost of the Macomb program is \$260.00. You can assume that your application has been accepted, however, if the class fills and you are not admitted, your money will be returned. All checks will be deposited. Full refunds will be made for cancellation requests made in writing on or before the first day of class only.**

Make check payable to: **Macomb MSU Extension**

Mail application and monies to: **MACOMB MSU EXTENSION
 21885 Dunham Rd., Suite 12
 Clinton Twp., MI 48036**

ATTN: Master Gardener Application

KEEP THIS PAGE!

Michigan State University Extension Programs and materials are open to all without regard to race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, marital status or family status. Michigan State University, U.S. Department of Agriculture, and Macomb County Board of Commissioners cooperating. MSU is an affirmative action equal opportunity employer.

MACOMB COUNTY MSU EXTENSION 2009 MASTER GARDENER VOLUNTEER TRAINING PROGRAM APPLICATION

The Winter-Spring 2009 Macomb MSUE
MASTER GARDENER PROGRAM will be held on
Thursdays from 9:00 am to 1:00 pm.
January 15, through March 26, 2009 .
Day Program

Please sign here if you are applying for
this program.

NAME _____

The Fall 2009 Macomb MSUE MASTER
GARDENER PROGRAM will be held on
Wednesday evenings from 6:00 to 10:00 pm.
September 9, through November 18, 2009.
Evening Program

Please sign here if you are applying for this
program.

NAME _____

_____ \$260.00 per person
_____ \$475.00 for couples who will share only one MG Manual.
Please note the name of individual
Who will share the Manual _____

Office Use
Receipt # _____
Check# _____
scholarship ___yes___no

One application per person. Feel free to duplicate this application. Please print or type all answers.

Name (first) _____ (last) _____ please circle: Male or Female

Name as you would like it to appear on name badge _____

Address _____ City _____ Zip _____

County of residence _____ Email _____

work phone (_____) _____ home/other phone (_____) _____

County Commissioner's District where you live, or Commissioner's name _____

Occupation _____

Employer Name & Address _____

Why do you wish to become a Master Gardener Volunteer?

List any training and gardening experiences and special interests, hobbies _____

List any group (garden or other) affiliations: _____

How did you learn of the Master Gardener Program? _____

I wish to become a Certified MSU Extension Master Gardener and understand that if I am accepted into the program I will donate 40 hours of my time for volunteer service to be completed within one year.

Applicant's Signature _____ DATE _____



MACOMB MSUE MASTER GARDENER PROGRAM SCHOLARSHIP APPLICATION

ONLY RESPOND IF YOU ARE SEEKING FINANCIAL ASSISTANCE

The information below will help determine the scholarship awards and will be kept confidential. Only the scholarship committee will have access to it and may contact individual applicants for additional information. Scholarships will be awarded partially based on financial need. An effort will also be made to have scholarship recipients from all racial groups and geographic areas within Macomb County. Applicants must fill out the Scholarship Application and return it to the office along with their check for the program. The scholarship money will be awarded after completion of the training program.

No Scholarship applications accepted after the first day of class.

Please write a few comments about yourself, your previous volunteer experience, participation in community activities and/or other organizations. **Also include why your financial situation would qualify you for a scholarship.**

If you have any questions about this application, please feel free to contact Hannah Stevens, Extension Horticulture Agent or Sandra Goeddeke-Richards, Home Horticulture Program Coordinator at (586) 469-6440 .

I acknowledge that this scholarship application does not insure that I will be guaranteed receipt of a scholarship. Only upon the recommendation and acceptance of the Scholarship Committee will a scholarship be awarded.

Applicant's Signature

Dated _____