



THE UNIVERSITY OF ARIZONA

Cooperative Extension

Pima County - Master Gardener

## MASTER GARDENER APPLICATION FORM

Current employees of the University of Arizona are not permitted to volunteer for the U of A, and thus are not eligible for the Master Gardener Program.

**DUE BY Friday May 1<sup>st</sup>, 2020**

*Please print or type:*

Please list your e-mail: \_\_\_\_\_

NAME:

\_\_\_\_\_

ADDRESS:

\_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: Day: \_\_\_\_\_ Evening or Cell: \_\_\_\_\_

**Before you complete the application, please read this information about our program:**

<http://uacals.org/2jw>

Please initial here that you have read this article: \_\_\_\_\_

**Mission Statement:** Pima County Master Gardener volunteers, directed and supported by University of Arizona faculty and staff, educate residents by providing unbiased research-based horticulture practices and information that promote the development of healthy, sustainable communities.

**WHY DO YOU WANT TO BECOME A MASTER GARDENER?**

**GARDENING BACKGROUND** (List your interests, experience, and skills related to plants and gardening and/or horticultural training that you may have had.)

**ARE YOU OR HAVE YOU BEEN A DOCENT AND/OR VOLUNTEER FOR ANY ORGANIZATION? If so please describe your experience.**

**ARE YOU COMFORTABLE SPEAKING WITH THE PUBLIC?** (Please describe your experience.)

**OCCUPATION(S):** Are you currently employed? If so, are you full time or part time? Will your schedule allow you to put in the needed class time and volunteer hours? If you are retired, what was your former occupation?

**ARE YOU AVAILABLE YEAR-ROUND FOR VOLUNTEER SERVICE?**

**Please initial each of the following statements after reading:**

\_\_\_ **I agree to an interview with the Extension Agent or representatives of Master Gardener program and will accept their decision as to my suitability to join the educational program.**

**IF I AM ACCEPTED AS A TRAINEE, I WILL:**

\_\_\_ **Be available to attend Tuesday morning classes from 9 a.m. to 12 p.m. (August to mid-December) for approximately 60 hours of classroom training on gardening information and methods.**

\_\_\_ **Pay the registration fee \$200.00 (payable to: PCCE) which covers the cost of reference materials which will become my personal property as well as the name badge and the green vest that represent the Master Gardeners.**

\_\_\_ **After certification, I will commit to 50 hours of volunteer service as a Master Gardener and 10 hours of continuing education per year to maintain the status of Master Gardener.**

\_\_\_ **Comply with policies and procedures of the Cooperative Extension and the UA.**

\_\_\_ **I give permission to the Pima County Cooperative Extension to use and publish photos/videos of myself for educational and promotional purposes.**

---

**Signature**

**Date**

**Please complete and return this application to: Master Gardener Training, Pima County Cooperative Extension, 4210 North Campbell Ave. Tucson Arizona 85719**



THE UNIVERSITY OF ARIZONA

# Cooperative Extension

Pima County - Master Gardener

Rev. 1/20

## Financial Assistance Request Form

Please fill out and turn in with your application **ONLY** if you are interested in receiving financial assistance toward the cost of tuition.

The [Pima County Master Gardener](#) program is an outreach program of the University of Arizona's Cooperative Extension Service. Our mission is to educate residents by providing unbiased research-based horticulture practices and information that promote the development of healthy, sustainable communities. We achieve this mission through a variety of outreach and educational activities that our trained volunteers lead throughout the year.

Through our own fundraising, we are pleased to be able to offer a limited amount of financial assistance to those who wish to join the Master Gardener program in 2020, but for whom the full tuition would be a hardship. Assistance is a partial scholarship only. Incoming Master Gardeners Students who are approved for assistance would need to pay a minimum of \$75 out of pocket. The remainder of the tuition would be waived by the Master Gardener program. Due to the limited amount of funds available, not all applications will be funded.

### Contact Info

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Financial Need**

- Anticipated gross annual family income (please circle)

\$0 - \$20,000	\$40,000 - \$50,000	\$70,000 - \$80,000
\$20,000 - \$30,000	\$50,000 - \$60,000	\$80,000 - above
\$30,000 - \$40,000	\$60,000 - \$70,000	

- Please indicate the program(s) in which you are currently enrolled. Dollar amounts of payments received from each program are not required.

Rent subsidy\_\_\_\_\_ WIC\_\_\_\_\_ TANF\_\_\_\_\_ Social Security\_\_\_\_\_ Disability\_\_\_\_\_ Other:\_\_\_\_\_

- Number of people residing in the home: ( 1 ) ( 2 ) ( 3 ) ( 4 ) ( 5 ) ( 6 )  
(more than 6)

**Personal Statement**

What does participating in the Pima County Master Gardener program mean to you? How would serving as an extension volunteer through the Master Gardener program impact your life?

---

---

---

---

---

Are there other circumstances or considerations you'd like to share?

---

---

---

---

---

I, \_\_\_\_\_ will successfully complete both the classroom portion  
*(print name)*

and the internship to become a certified Pima County Master Gardener, in a timely manner.