

The West Virginia University Extension Service Volunteer Application  
(To be completed by all potential Master Gardener volunteers)

General Information

Name: \_\_\_\_\_  
(First) (Middle) (Last)

Mailing Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Employer: \_\_\_\_\_ Email: \_\_\_\_\_ @ \_\_\_\_\_

How long have you lived at this address (years): \_\_\_\_\_

Phone Day: \_\_\_\_\_ Evening: \_\_\_\_\_ Best time to call: \_\_\_\_\_

Extension Master Gardener Information

1. What kind of gardening are you interested in: vegetables, flowers, houseplants, landscaping, lawns, etc....

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2. Summarize your gardening experiences:

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3. When are you available for volunteer activities: \_\_\_ Daytime \_\_\_ Evenings \_\_\_ Weekends

4. What groups or organizations have you been a member of (gardening and non-gardening)?

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5. The following is a partial list of areas where Extension Master Gardeners have fulfilled their volunteer time. Check those where you think you would prefer to volunteer.

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|--|---|--|
| <input type="checkbox"/> Giving talks to groups        | <input type="checkbox"/> Working in demonstration garden    | <input type="checkbox"/> Judging at fairs or festivals |
| <input type="checkbox"/> Answering telephone inquiries | <input type="checkbox"/> Teach future Master Gardener class | <input type="checkbox"/> Horticulture therapy          |
| <input type="checkbox"/> Staffing flower show booths   | <input type="checkbox"/> Working with children              | <input type="checkbox"/> Advising community            |
| <input type="checkbox"/> Writing garden articles       | <input type="checkbox"/> Working in school gardens          | <input type="checkbox"/> Other:                        |

6. Why should you be selected for this program?

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Youth Volunteer Interest *(If you have no interest in working with youth, skip to the next section.)*

1. Do you prefer to work directly with: \_\_\_Youth \_\_\_Adults \_\_\_Both
2. Have you even been a youth volunteer? \_\_\_Yes \_\_\_No
3. If you prefer to work directly with youth, what age level(s) do you prefer?  
\_\_\_Ages 5-8 \_\_\_Ages 9-12 \_\_\_Ages 13-19 \_\_\_No preference
4. Why are you interested in working with the youth program?

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Volunteer and Work Experience

1. Have you ever been a volunteer? \_\_\_Yes \_\_\_No If yes, how many years? \_\_\_\_\_
2. What time commitment do you desire initially?  
\_\_\_1-2 months per year \_\_\_3-6months per year \_\_\_7-12 months per year \_\_\_Ongoing
3. Previous Volunteer Experience: *(List current or most recent experience first; list any youth experience)*

Organization	Volunteer Role	Year
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4. Previous Work Experience: *(List current or most recent experience first)*

Employer	Position Title	Year
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Personal Information

1. Have you been convicted of a crime in the last seven years? \_\_\_Yes \_\_\_No
2. If yes, please give date, nature and disposition of offense. \_\_\_\_\_  
**(Please note: A criminal record will not necessarily prevent an applicant from being a volunteer; a criminal record will be considered as it relates to specifics of the volunteer position for which you are applying.)**

