

K-State Research and Extension - Shawnee County Extension Master Gardener (SCEMG) Program Application

PROGRAM INFORMATION AND GUIDELINES

- Possess a high school diploma or equivalent and a broad interest in horticulture.
- Complete the basic training course using a combination of in-person and Zoom learning.
- The year after you complete the course, 2025, is considered your In-Training year. During this time, you are expected to complete at least 40 hours of volunteer work of approved projects. Of those 40 hours, 20 are dedicated to working the Response Line. In addition, you need to obtain 6 units of approved Advanced Training, attend 4 SCEMG monthly business meetings, and participate in 1 SCEMG fundraiser.
- Be willing to communicate research-based information from K-State, even if it includes the use of pesticides or other chemicals.
- Read and sign the Pest Management Information Policy. (*See page 5.*)
- Read and sign the SCEMG Volunteer Agreement and Code of Conduct. (*See page 6.*)
- Once you have successfully completed your In-Training year; to continue as an active Master Gardener you will need to complete the following annually: 25 hours of volunteer hours, 6 units of Advanced Training, attendance at 4 SCEMG monthly business meetings and participation in 1 SCEMG fundraiser.

Please type your responses

How did you hear about the Extension Master Gardener program?

Are you acquainted with any active Shawnee County Extension Master Gardeners?

Yes Name(s) _____

No

TIME AVAILABILITY

In 2024, the training will be held in-person (preferred) and online (as needed). Short quizzes will be assigned after every class. These assignments and sessions can take between 5-7 hours each week. **Will your employment or other regular commitments allow you to be available to participate in the 2024 KSU EMG Basic Training Course and to complete the required volunteer hours from 2025 forward?**

GARDENING EXPERIENCE/TRAINING

Please list training, courses, or experience you have in areas of gardening (annuals, vegetables, houseplants etc.), conservation, public speaking, teaching, technology, volunteerism, or other relevant areas. (200 words or less).

Please list your occupation (or what you did before you retired) and any skills in non-horticultural areas (writing, computers, graphics, art, photography, etc.) that might be relevant to your volunteer activities.

Discuss your reason(s) for wanting to join the SCEMG program - what is your “why”? (150 words or less)

Describe one idea you have for an educational horticulture program that would have a positive impact on our community. (200 words or less)

COMMITMENT

Thank you for your interest in the SCEMG program and for completing this application. It will be carefully considered by Extension staff and designees.

- SCEMG are volunteers through K-State Research and Extension. Volunteers represent K-State and are considered unpaid university staff.
- SCEMG operate under the guidance of trained Extension professionals responsible for monitoring their performance and the progress of their continuing education.
- SCEMG are expected to provide gardening advice based on research-based information, and to provide educational program assistance in support of the general county Extension education program.
- SCEMG volunteers **may not** participate in the Shawnee County Extension Master Gardener program for financial gain or for commercial credentials, recommendations, or endorsements. Such behavior may result in removal from the organization or rejection from this process.

I wish to become a SCEMG Trainee and agree to abide by the qualifications for acceptance and continued commitment including 40 hours of volunteer time in the first year and other commitments as described in the **Program Information and Guidelines for the Extension Master Gardener Program** (page 1).

I understand there is a participation fee of \$150.00 due August 23rd if I am accepted and that it is non-refundable. Fees may be paid with cash or check but must be done in-person.

Name: _____

Address: _____

E-mail: _____

Phone Number: _____

Signature: _____

By typing your name, you are signing this application electronically.

Mail to: Shawnee County K-State Research and Extension
1740 SW Western Avenue
Topeka, Kansas 66604-3052
Attention: Lane Wiens

E-mail to: lwwiens@ksu.edu

**Completed applications due July
26th, 2024!**

Please indicate which pre-acceptance orientation session you will be attending:

August 15, 2024 9:00 AM to 11:00 AM

August 15, 2024 5:00 PM to 7:00 PM

(Sessions will be held at the Shawnee County Extension Office)

Note: Write this date on your calendar.

FOR OFFICE USE ONLY:

Name for internal directory: _____

Significant other: _____

Include their name in directory? _____

If preferred contact number is a cell number do you want to include Texting (T) in directory? _____

K-State Research and Extension is committed to providing equal opportunity for participation in all programs, services, and activities. Program information may be available in languages other than English. Reasonable accommodations for persons with disabilities, including alternative means for communication (e.g., Braille, large print, audio tape, and American Sign Language) may be requested by contacting Lane Wiens two weeks prior to the start of the event at 785-232-0062 or lwwiens@ksu.edu. Requests received after this date will be honored when it is feasible to do so. Language access services, such as interpretation or translation of vital information will be provided free of charge to limited English proficient individuals upon request.

Shawnee County Extension Master Gardener Pest Management Information Policy

Protection of the environment and human health is a concern of everyone. To promote wise and effective pest management decisions, the Shawnee County Extension Master Gardeners are asked to subscribe to the following policies. This contract will serve as a formal basis for Master Gardeners when providing pest management information.

1. I understand that as a Master Gardener the pest management information I provide must be limited to home, lawn, and garden problems; questions concerning commercial crop production, commercial pest control, and pesticide liability are to be referred to the appropriate Extension professional.
2. I understand that as a Master Gardener I will provide both nonchemical and chemical pest management information as approved by Shawnee County Extension and allow the client their choice of strategies. KSRE is committed to the least chemical usage as possible.
3. I understand that pesticides must be applied with care and only to plants, animals or sites listed on the pesticide label. When mixing and applying pesticides, all label precautions must be followed to protect the applicator, other persons, and the environment. It is a **violation of the law** to disregard label directions. I will attempt to communicate this information to the client along with the pest management options.
4. Read and follow label.
5. I understand that as a Master Gardener I am considered a volunteer representative of Kansas State University. Therefore, KSRE will assume liability for the pest management information I provide, **only if the information is limited to accurate, documented control options approved by Kansas State University Extension for home and garden use.**

If either myself or the client are not clear on information, I understand that I should request clarification from the appropriate Extension professional.

Print Name

Date: _____

Signature

By typing your name, you are signing this application electronically.

Shawnee County Extension Master Gardener

Volunteer Agreement & Code of Conduct

While volunteering as a Shawnee County Extension Master Gardener (SCEMG), I will agree to the following:

1. Work within the Master Gardener Program. As an SCEMG volunteer, I am accountable to the local staff, the local Extension unit, K-State Research and Extension, and Kansas State University for my actions.
2. Work as a “team player” for the good of the SCEMG program. I will work cooperatively with clients, other volunteers, and Extension staff. I will treat them with respect.
3. Not endorse products or services in my role as a SCEMG.
4. Not participate in the SCEMG for personal financial gain.
5. Base my recommendations and horticultural information on approved sources and research-based information only.
6. Complete the required volunteer and training hours on an annual basis to maintain active status.
7. Participate in meetings, self-study, or other training programs that will help me work more effectively with young people and adults.

Code of Conduct:

1. I will honor my volunteer commitment.
2. I will follow established guidelines for keeping financial records and handling SCEMG funds.
3. I will make all reasonable efforts to assure equal access to participation for all youth and adults. Kansas State University is an equal opportunity provider and employer, committed to non-discrimination on the basis of race, sex, national origin, disability, religion, age, sexual orientation, or other non-merit reason.
4. I will provide a safe environment for all. I will not harm youth or adults in any way, whether through sexual harassment, physical force, verbal or mental abuse, neglect, or other harmful experiences.
5. I will not use alcohol or any illegal substances (or be under its influences) while working with or being responsible for youth, while on Extension grounds, or while representing the SCEMG program to the general public. I will not allow youth to do so while under my supervision.
6. I will operate machinery, vehicles, and other equipment in a safe and responsible manner. When operating a motor vehicle, I will have a valid driver’s license and the legally required insurance coverage.
7. I will exhibit the character traits of trustworthiness, respect, responsibility, fairness, caring, and citizenship.
8. I will use technology and social media in safe and appropriate ways for the enhancement and promotion of the SCEMG program.
9. I will obey the laws of the locality, state, and nation as well as K-State Research and Extension and SCEMG policies and guidelines.

Signature Required:

1. I have read and agree to abide by the volunteer agreement and code of conduct. I agree to comply with the policies, rules, and regulations of the Shawnee County Extension Master Gardener program and local Extension Unit.
2. In signing this document, I apply to be an Extension Master Gardener with the local Extension Unit and the Kansas Extension Master Gardener program.
3. As a SCEMG volunteer, I serve at the request of K-State Research and Extension-Shawnee County and may be removed from service at its discretion. I may resign my volunteer role at any time at my discretion.

Name (Please Print): _____

Signature: _____

Date: _____

By typing your name, you are signing this application electronically.