



# University of Illinois Extension Master Gardener Trainee/Intern Agreement

*The intent of the agreement is to assure University of Illinois Extension Master Gardener volunteers of our deep appreciation of your services and to indicate our commitment to do the very best we can to make your volunteer experience a productive and rewarding one.*

*The purpose of the University of Illinois Extension Master Gardener Program is to provide horticultural information specific to local climates, soils and plants, and training to the general, non-profit gardening public, based on University of Illinois research, when available.*

In the capacity of a University of Illinois Extension Master Gardener trainee/intern, I understand and agree to:

- successfully complete all Master Gardener core course training units.
- work with local Extension Unit staff and volunteers to implement a program of excellence in the community.
- comply with training, documentation, and certification, requirements, as delineated in the *Illinois Master Gardener Manual*, **currently a minimum of 60 hours of approved volunteer service** to complete my internship.
- provide non-biased horticultural information endorsed and sanctioned by University of Illinois Extension.
- make all reasonable effort to assure that horticultural information is accessible to the general public, nonprofit public, without regard to race, color, religion, political beliefs, national or ethnic origin, immigration or citizenship status, sex, gender identity and expression, transgender status, sexual orientation, age, marital or family status, educational level, learning style, pregnancy, physical appearance, body size, and individuals with disabilities.
- refer non-home gardener inquiries to the appropriate educator or specialist
- cooperate with and support Extension Unit staff members to jointly further the missions and objectives of the University of Illinois Extension Master Gardener Program.
- consistently exhibit a professional manner to Extension Unit staff, other volunteers and the public.
- use the title of University of Illinois Extension Master Gardener **only** when doing unpaid public service work through University of Illinois Extension sponsored or approved programs. The title is not to be used to advertise names or places of business, nor to associate the Master Gardener name with commercial products or give implied endorsements of any product or place of business.
- follow state and federal laws and regulations as well as the policies and guidelines of the local Extension Unit and University of Illinois.
- recognize that verbal or physical abuse, failure to comply with equal opportunity and anti-discrimination laws, or committing criminal acts may be grounds for termination as a University of Illinois Extension Master Gardener.
- refrain from using or possessing weapons, alcohol or illegal substances while participating in volunteer activities. Being under the influence of alcohol or illegal substances or possessing a weapon during Master Gardener service may result in termination as a University of Illinois Extension Master Gardener.
- provide my own transportation and pay my own expenses incurred as part of official volunteer activities. Expenses may be tax deductible with proper documentation. Actual out-of-pocket expenses for supplies and materials provided by volunteers may also be recovered through program or class fees charged to participants upon prior approval of the county director.
- abide by the Illinois Department of Agriculture licensing requirements for the application of pesticides when acting as a Master Gardener volunteer.
- possess a valid Illinois drivers license and the minimum amount of state required automobile insurance if I will drive others as part of my approved volunteer role.
- abide by the spirit of the above rules and follow current University of Illinois Extension Master Gardener program policy guidelines in order to obtain my certification as an Extension Master Gardener.
- receive email communications from Extension staff in order to stay up to date on volunteer activities.

I further understand that University of Illinois Extension will:

- make all reasonable effort to assure that horticultural information is accessible to the general public, nonprofit public, without regard to race, color, religion, political beliefs, national or ethnic origin, immigration or citizenship status, sex, gender identity and expression, transgender status, sexual orientation, age, marital or family status, educational level, learning style, pregnancy, physical appearance, body size, and individuals with disabilities.
- support Extension Master Gardener volunteers.
- provide equipment, training, supervision, and direction to volunteers through the local Extension Unit.
- communicate expectations and responsibilities of the program to volunteers.
- uphold and cultivate a trustful relationship between staff and volunteers.
- provide continuing education opportunities such as the annual state Master Gardener conference.
- provide a state Master Gardener website and communications from the state program..
- provide University of Illinois reference materials.
- provide a safe working environment within the University of Illinois Extension office.
- provide access to University of Illinois Extension professionals.
- match volunteer skills and interests with volunteer opportunities within the local Extension Unit.

I have read and understand this volunteer agreement. I am at least 18 years of age and have the full right and authority to execute this agreement. I further agree to abide by the conditions and behavioral expectations of this document. I understand that my failure to comply with these expectations may result in my termination as a University of Illinois Extension Master Gardener volunteer.

University of Illinois Extension Master Gardener Participant:

\_\_\_\_\_  
*Name (Please print)*

\_\_\_\_\_  
*e-mail address*

\_\_\_\_\_  
*Current Mailing Address (Street, City, State, Zip)*

*Curre*

\_\_\_\_\_  
*County Office*

\_\_\_\_\_  
*Volunteer Telephone number*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

University of Illinois Extension Unit Representative:

\_\_\_\_\_  
*Name (please print)*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Signature of staff member*

\_\_\_\_\_  
*Date*

This University of Illinois Extension Trainee/Intern Agreement will be on file in the University of Illinois Extension Unit office.



**Illinois Extension**

UNIVERSITY OF ILLINOIS URBANA-CHAMPAIGN

**College of Agricultural, Consumer and Environmental Sciences**

University of Illinois | U.S. Department of Agriculture | Local Extension Councils Cooperating  
University of Illinois Extension provides equal opportunities in programs and employment.

If you need a reasonable accommodation to participate in this program, please contact us.  
Early requests are strongly encouraged to allow sufficient time for meeting your access needs.

*Revised November 2020*