



## Interest Form for the Champaign County Master Gardener Program

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

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

- I wish to take training to become a Master Gardener volunteer.  
(please check one)
- To Become a Master Gardener Volunteer
  - Personal/Professional Path Only - No Volunteer Commitment
  - Unsure at this time - want to learn more

1. Briefly state your gardening interests such as vegetables, flowers, herbs, etc.
  
  
  
  
  
  
  
  
  
  
2. Briefly tell why you would like to become a Master Gardener.
  
  
  
  
  
  
  
  
  
  
3. Do you know anyone who is already a Master Gardener? If so, please give name(s).
  
  
  
  
  
  
  
  
  
  
4. Please list any special skills, hobbies or interests such as photography, carpentry, computers, graphic art, and public speaking.

5. There are many opportunities for volunteering in the Master Gardener program and we are open to new ideas. Check any of the following activities you have interest:

- Talk to school children about gardening
- Assist with Master Gardener training in future years
- Assist with garden walk, garden day and/or plant sale
- Work with kids in local community gardens
- Coordinate program topics for Master Gardener meetings
- Serve on the Master Gardener committees
- Help kids to identify flowers, vegetables or trees etc.
- Write newsletter or website articles
- Conduct gardening workshops
- Assist with TV or radio programs
- Assist with Q+A booth at events such as fairs and home, lawn and garden shows
- Serve as a resource person for community gardens
- Assist in the office answering questions from local gardeners
- Other \_\_\_\_\_

6. Are you able to volunteer during weekdays?

Yes  No

7. Are you employed?

Yes  Full Time  Part Time

No  Retired

8. How did you learn about the Master Gardener Program?

9. If you are interested in the volunteer path and accepted into the Master Gardener Program and you complete the training, **do you agree to continue your education by accomplishing 60 hours of volunteer internship in approved University of Illinois Extension projects - within 2 years following training?**

10. Yes  No

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Return application to:**

UI Extension  
Attn: Tabitha Elder  
801 N. Country Fair Drive Ste D  
Champaign, IL 61821  
Phone: 217-333-7672  
Fax: 217-333-7683