

APPLICATION MUST BE RETURNED NO LATER THAN JULY 15, 2022

Name: _____ Date: _____
(Print or Type)

You are invited to our free, informational Zoom information session on June 6, 2022 at 1:00 p.m. In this session you will hear about the exciting opportunities available, learn if our EMG program is a good fit for you and give you insights into completing the application. The Zoom Information session link is <https://ksu.zoom.us/j/92776725698?pwd=RU5paFFyby9PajVncnpHejZVMldNQOT09>

Johnson County EXTENSION MASTER GARDENER PROGRAM K-State Research and Extension

Mission: The mission of the Johnson County K-State Research and Extension Master Gardener volunteer program, hereinafter named as “Program” is to preserve and beautify the environment and improve the quality of life in the community by providing current research-based horticultural information to the public. The Program promotes horticultural practices, sustainability, and environmental initiatives supported by K-State Research and Extension. The Program embodies the horticultural education objectives of the Johnson County Extension Council cooperating with Kansas State University and the United States Department of Agriculture.

Guidelines for Extension Master Garden (EMG) Program Participation:

- Be a resident of Johnson County
- Have a high school diploma or equivalent
- Possess a broad interest in horticulture
- Understand the value of volunteering
- Comply with the policies, rules, and regulations of the Extension Master Gardener Program and the Johnson County Extension Council
- Attend the approximately 65-hour basic EMG Training Course held on **Thursday from 9:30-12:00 and from 1:00-4:00. Sessions are a mix of in person and online zoom sessions. Required classes run Sept. 1st – Dec. 15th.** A schedule will be provided upon acceptance into the program.
- Complete 40 hours of volunteer work beginning in 2023 with Advisory Board-authorized activities, including at least three EMG Hotline shifts, on or before September 1, 2023.
- After successful completion of the basic EMG Training Course, continue an **annual** commitment to volunteer a minimum of 30 hours on volunteer projects, and attend at least 10 hours of EMG advanced training = 40 hours
- Agree to support the Extension pest control policy based on a combination of sound horticulture practices, organic controls, and chemical treatment as necessary.
- Pay \$125 entrance fee (after acceptance into program)

Selection for the EMG program are based upon the responses you provide in this application. Please reply to **all** questions in a **complete** and **informative** way, but keep your answers brief and concise. **DO NOT** exceed the original length of the page or attach extra pages.

Name: _____ Date: _____
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1. Time Availability

- a. Basic training is offered every Thursday starting September 1st and runs through December 15th. Training is offered as a combination of in person learning and on zoom. A schedule will be provided upon acceptance into the program. Attendance is required except for preapproved absences. Please describe your time availability and known conflicts for Basic Training.

- b. Most EMG Volunteer activities occur during weekday mornings, and during the months of March through October. There are limited opportunities for afternoon, evening, and weekend volunteering. Describe your free time to engage in volunteer activities.

2. Garden Interests

Describe your garden experience, any areas of garden specialization or interests that you have. Include any training, courses, or other horticulture education programs you have attended.

3. Gardening and Non-Gardening Volunteer Activities

Briefly discuss why/where you are a volunteer and describe a significant volunteer experience. What do you enjoy most about them, what do they satisfy in you?

Name: _____ Date: _____
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4. Hobbies/Skills/Talents/Areas of Interest/Professional Skills etc.

5. Why Do You Want to Be An EMG?

Name: _____ Date: _____
(Print or Type)

6. EXTENSION MASTER GARDENER AREAS OF INTEREST

Please indicate the level of your interest in participating in **each** of the EMG volunteer projects listed below by entering an A, B or C in the spaces provided. Some activities require physical work or interacting with the public, while others concentrate on planning and administrative tasks. All activities are vital to the success of the EMG organization in fulfilling its mission to the community.

A = Very Interested B = Interested C = Least Interested

Demonstration Gardens

_____ Blue Valley Wilderness Science Center: Butterfly and bird gardens to support Blue Valley school programs at 163rd and Nall.

_____ Deanna Rose Children's Farmstead: flower and vegetable gardens at 137th and Switzer in O.P.

_____ Johnson County Extension Garden Gallery: Showcasing recommended trees, shrubs, and flowers for Kansas City gardens; located at the east end of our office building

_____ K-State Research Center Backyard Garden: Vegetable, flower, and pollinator gardens and horticulture research plots in Western Olathe.

_____ Overland Park Arboretum – Monet Garden: Trees, shrubs, and flowers in the Monet Style at 179th and Antioch, Overland Park.

_____ Shawnee Indian Mission: A mid-1800's period vegetable garden, rain garden, and native plants at this Kansas historical site on Mission Rd. north of Shawnee Mission Parkway

_____ Shawnee Town Gardens: Historical and theme gardens located in Shawnee Town on Johnson Dr. in downtown Shawnee

_____ Wassmer Park: Intimate garden in Prairie Village showcasing annuals, perennials, and shrubs.

_____ West Flanders: Belgium themed garden in Shawnee, includes herb, vegetable, perennials and native.

Community Outreach

_____ Community Outreach: Staff information tables at community events where the public can learn more about the EMG program and ask gardening questions

_____ Evergreen Horticulture Therapy Project: Maintain vegetable and flower beds and interact with the residents, staff, and families who visit the senior living center located just west of the Extension office building.

_____ Hotline: Supply research-based responses to telephone, walk-in, and email questions

_____ Jr. Master Gardener Activities: Plan and participate in after school programs and special community events which encourage children's interest in gardening.

_____ Public Garden Tour: Assist with the planning, coordination, promotion, preparation, and staffing of the biennial public tour of EMG gardens. This option is biennial so 2024, 2026 etc.

_____ Speakers' Bureau: Research, prepare, and present talks on a variety of horticultural subjects to garden clubs, church groups, and community groups.

_____ Wildlife Habitat: provide education to help develop nature friendly landscapes.

Name: _____ Date: _____
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EMG Program Support Services

_____ Educational Materials: Plan, design, and construct displays, exhibits, handouts, and brochures to support EMG activities, garden tours, and presentations.

_____ Merchandise: Coordinate the selection, creation, and sale of garden-related merchandise to be sold during EMG events.

_____ Social and Entertainment: Plan and staff banquets, picnics, and other social events

_____ Training and Tours: Plan, arrange, and promote programs, tours, and seminars to satisfy needs of EMGs for continuing education.

7. Areas of Greatest Interest:

Please select **three projects** from **question 6** and explain why they are the most appealing to you.

SIGNATURE OF UNDERSTANDING

Thank you for your interest in the EMG program and for completing this application. It will be carefully considered by members of the Advisory Board.

EMGs operate under the guidance of trained Extension professionals responsible for monitoring their performance and the progress of their continuing education.

EMGs 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.

EMG volunteers may not participate in the Johnson County Extension EMG program for financial gain or for commercial credentials, recommendations, or endorsements.

I wish to become a Johnson County EMG Trainee and agree to abide by the qualifications for acceptance and continued commitment as described in the **Guidelines for EMG Program Participation**.

Name: _____
(Print or type)

Address: _____

City, State, and Zip Code: _____

Telephone Number (Home): _____

Telephone Number (Cell/Business): _____

Email: _____

Note: EMG communication occurs by email.

Emergency Contact Name: _____ Relationship to you: _____

Emergency Phone: _____

Publicity Release (Click on or check one of the boxes below)

- I authorize K-State Research and Extension or their assignees to record, video, and photograph my image and/or voice for use in research, educational, and promotional programs. I also recognize that these audio, video, and image recordings are the property of K-State Research and Extension.
- No, I do not authorize use of my individual image or voice.

**Mail to: Johnson County K-State Research and Extension
11811 S. Sunset Drive, Suite 1500
Olathe, KS 66061-7057
Attention: Mary Matthew
Email to mary.matthew@jocogov.org**

K-State Research and Extension is committed to making its services, activities, and programs accessible to all participants. If you have special requirements due to a physical, vision, or hearing disability, please contact Johnson County Extension at 913.715.7000. K-State Research and Extension is an equal opportunity provider and employer.

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