THE UNIVERSITY OF GEORGIA
COOPERATIVE EXTENSION
Colleges of Agricultural and Environmental Sciences & Family and Consumer Sciences

Memorandum of Agreement for Extension Volunteer Master Gardeners

I wish to **RENEW** my active status as a Georgia Master Gardener® Extension Volunteer for the year **2012.**
I agree to donate 25 hours of volunteer service to **DEKALB** County Cooperative Extension during the upcoming year. I will provide a record of this service at the end of the year (as requested by our county staff). I understand that my Master Gardener Badge is only to be worn in an approved volunteer capacity. I agree to not use the Georgia Master Gardener® title to promote or endorse any commercial activities, products, or private business ventures. I understand that violation of this policy may cause immediate withdrawal of all certification privileges. I understand that as a Georgia Master Gardener® I am a representative of The University of Georgia, and as such, discrimination of any kind is not acceptable and could result in immediate loss of certification privileges. Programs involving volunteer contact with minor children such as 4-H or Junior Master Gardeners require successful completion of a mandatory UGA background investigation which is kept on file.

I further agree that any non-commercial pesticide or cultural recommendations given will be in accordance with published University of Georgia Cooperative Extension recommendations.

_____ _____ _____
Applicant Signature and Date | Printed Name | County Extension Agent

In the blanks below, please indicate the number of hours you plan to donate for each project or activity. A minimum of 25 hours for any combination of Extension approved volunteer projects, activities, or events are required to remain certified as a Georgia Master Gardener®.

I WILL VOLUNTEER MY TIME TO THE FOLLOWING APPROVED PROJECT COMMITTEES:

# Hours	Project	# Hours	Project	# Hours	Project
	Children's Programs (JMG)		Plant Clinics		
	Civic Club Presentations		Research and/or Writing		
	Demonstration Gardens		Teaching Adult Classes		
	Habitat for Humanity		TV and/or Radio programs		
	Newsletters		Advisory Committees		
	Newspaper/Mag. Articles		Project/Site Leader		
	Food prep./donation to quarterly meetings				
	Food prep./donation to new intern training (Jan.-March each year)				
	Food prep./donation to county Holiday Event (December)				
	Others as approved by our county extension staff (**approval should come prior to event and/or activity)**				

*I would like to submit my name to serve as a presenter/speaker at local MG Training events, schools and/or civic group engagements as requested by local extension staff.

NAME: **TOPICS:**

_____

I WILL VOLUNTEER MY TIME TO THE FOLLOWING APPROVED ACTIVITIES/EVENTS:

# Hours	Activity	# Hours	Activity	# Hours	Activity
	Extension Office/Help Desk		Home Visits/Consultations		
	Exhibits (County Fair/Trade Show)				
	Conducted/Judged Flower Shows				
	Other Activities Approved by Agent (please list):				

I would like to move to another project site (where?)_____
I would like to become inactive (why, if you want to tell us)_____
_____

The University of Georgia and Fort Valley State University, the U. S. Department of Agriculture and counties of the state cooperating.
The Cooperative Extension Service offers educational programs, assistance and materials to all people without regard to race, color, national origin, age, sex or disability.
An equal opportunity/affirmative action organization committed to a diverse work force.