



Oregon State
University

**OSU Extension Jackson County
Master Gardener Volunteer™
Activity Proposal Application**



General Information

- Project name _____
- Master Gardener submitting request _____
Phone _____ Email _____
- Name of coordinator (if different) _____
- Partner organization (if applicable) _____
 - Partner name and contact info _____

- Location of project (address) _____
_____ (County) _____
- Date(s) of activity _____ Total Hours Anticipated _____

Project Description

- Describe (in detail) how this activity/project enhances and supports the Jackson County MG Program?

- What is the goal of this project?

- How will it be determined if goals are met? Results? Behavior change? Impact? Income?

- Who is the target audience? _____

- We are applying for this project in the following category:

OSU MG Program Activity*

Partner Activity**

- How many MGs will be volunteering? _____

- How will volunteers be recruited for this event/project? _____

- Names of participating MGs (if known):

- In order to receive approval, projects must contain a significant element of research-based horticultural education. Simple beautification projects will not be considered. Describe how this project will meet the requirement of providing horticultural education to a wide community audience.

- Will an information box be used? (PNW Handbooks, Plant Clinic Binder, MG training information, phone clinic numbers, etc.) _____

(the Program office needs to be notified **at least 2 weeks** prior to event to prepare box)

- If an information box is not used, what OSU research-based information will be on-site? (Be sure to supply MG training information, phone clinic numbers, magnets etc.)

- Name of MG assigned to pick up and return the clinic box? _____

(For seasonal event, the clinic box, with contact number sheets, needs to be returned to the program office no later than October 31)

- Name of MG returning all required forms/contact sheets to the Program Office? _____
(For seasonal events, the contact forms need to be returned to the program office no later than October 31)
- Describe how this event/activity will be promoted including OSU and MG logo use.
(Attach drafts of flyers, advertisements, handouts or banners for pre-approval)

- What are the expected expense items for the project /event? _____
- How will this project/event be funded? _____

- Is there a fee charged, donations solicited or money raised from this project/event?

- Who will be responsible for turning in the money or making the deposit? _____

Please Read and Sign

- I agree that approval must be given from the Program Office in writing before the event or project is advertised, promoted, or recruited for as an OSU Program 'accepted' project. Chapter 'specific' projects or events without this approval will not qualify as an MG Program volunteer opportunity.
- If this project is approved, notify the Program office **at least two weeks** before the event and make arrangements to pick up and return a resource box. This box will include MG class recruitment information and office phone numbers.
- **Project approval is for one year.** If project is an annual event, re-application is necessary.
- Keep records of the event (or project) contact person(s), number of people attending (or impacted), and names of volunteers participating. After the event (project) coordinator must submit an information form to Program Office by Oct. 31.
- Even if all criteria are met, the project might not get approval due to current circumstances or other logistical limitations (for example, COVID-19).
- MGs must agree to refrain from expressing personal opinions, political, or religious views. Master Gardeners present or volunteering at this event must understand that they are representing Oregon State University, OSU Extension Service and the Master Gardener Program™ views exclusively.
- I agree that there will not be any promotion or recruitment for this event/project until given Program approval.

- *** I understand that OSU MG Program Activity* describes MGs volunteering on behalf of OSU Extension at these pre-approved Jackson County MG Program activities only:** Plant Clinics (in-office or remote) and MG program remote tabling clinics at farmers' markets, garden shows, fairs, etc.; Ask an Expert; and Speaker's Bureau, community or school garden educator. These are Jackson County Master Gardener Program's primary outreach service activities.
- ****I understand that Partner Activity** describes all other educational or support activities by OMGA Chapters or other partners that are pre-approved by the Jackson County MG program staff that support or enhance the Jackson County Master Gardener program.**
- I understand that unless all MG Program criteria are met, the project/event will not be considered as a Jackson County MG volunteer activity. The decision for approval comes from the Jackson County MG Program Coordinator in writing.
- Please complete, sign and return agreement form to:
Erika Szonntag, OSU MG Program Coordinator, 569 Hanley Road, Central Point, OR 97502 or as a scanned document to erika.szonntag@oregonstate.edu

Signature _____ Date ____/____/____

Print name _____

Mailing address _____

Phone _____ Email _____

Keep a copy for your records

For Office Use Only

| | |
|--|---|
| Project/Activity Name _____ | |
| Date of activity _____ | |
| <input type="checkbox"/> Not approved | <input type="checkbox"/> Approved |
| <input type="checkbox"/> OSU MG Program Activity* | <input type="checkbox"/> Partner Activity** |
| _____ Erika Szonntag, Jackson County MG Program Coordinator (signature required) | |
| Comments: _____ | |
| _____ | |
| _____ | |
| _____ | |
| Date application received: ____/____/____ | Date application returned: ____/____/____ |