

Volunteer Application



2024 Training: Lane & Lincoln Counties

PROGRAM DESCRIPTION:

The Master Woodland Manager program is for small woodland owners. Priority will be given to applicants who own property or reside in Lane or Lincoln counties (occasionally, neighboring counties are allowed if space is available and at the discretion of the host agent). The maximum amount of MWM trainees in one class is 25. Because this is a high-level training, participants must have completed at least one previous training, such as the Basic Forestry Shortcourse. The MWM program is unique in that it requires a specific type of person who will fulfill the requirements of volunteer payback and represent OSU Extension positively. Because of this, the final decision of whether an applicant is chosen for the training is up to the FNR host agent.

Please return completed application by mail or email to your local Extension Agent:

Lane County: Lauren Grand
lauren.grand@oregonstate.edu
Lane County Extension Office
996 Jefferson Street
Eugene, OR 97402

Lincoln County: Dan Stark
dan.stark@oregonstate.edu
Lincoln County Extension Office
1211 SE Bay Boulevard
Newport, OR 97365

YOUR CONTACT INFORMATION

First Name	<input type="text"/>	Last Name	<input type="text"/>
Address	<input type="text"/>		
City/State	<input type="text"/>	Zipcode	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>

YOUR PROPERTY

Woodland Acres Owned	<input type="text"/>	Years Owned	<input type="text"/>
Location of property (coordinates or address)	<input type="text"/>		
Do you have a Management Plan?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	

GENERAL INFORMATION

Briefly describe your woodland property and the nature and length of your involvement with it (tree species, age of stands, goals and objectives, family history with property, etc.)

How have you gained your current forestry knowledge? That may include working with/for family members, formal study, other Extension programming, etc.

What woodland-related topics are you most interested in learning about at this stage in your life?

Please list any skills and abilities (forestry-related or other) you think will contribute to your effectiveness as a volunteer:

Do you have any volunteer experience?

No

Yes

If yes, please describe:

How familiar or comfortable are you with computers and technology? This training is delivered in a hybrid format and does include using a computer to access content.

I am capable and comfortable using a computer

I am somewhat capable and comfortable using a computer

I rarely use computers or the internet and/or do **not** have reliable access or service

Please share any other information here:

Note: This information is for the use of the MWM instructors and will not be made public

Oregon State University Extension Service prohibits discrimination in all its programs, services, activities and materials on the basis of race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, familial/parental status, income derived from a public assistance program, political beliefs, genetic information, veteran's status, reprisal or retaliation for prior civil rights activity. (Not all prohibited bases apply to all programs.)

When space is limited, this short version may be used. However, the full version is preferred.

OSU Extension Service prohibits discrimination in all its programs, services, activities and materials.



I hereby apply for the Master Woodland Manager program of Forestry Extension, a unit of the Oregon State University Extension Service. I agree to abide by the conditions and requirements as described in the program materials and as set forth below. I will serve as a volunteer for Oregon State University, but acknowledge that my role as a Master Woodland Manager does not make me an employee of OSU.

In exchange for the formal training received, I agree to return a period of volunteer service equal to the number of hours of training received. Volunteer service is to be completed within two years of completing the Master Woodland Manager training. I agree to provide volunteer service supporting woodland owners, conservation or civic groups regarding forestry and natural resources in my community and the region. I understand that the MWM program has reporting responsibilities to its sponsors, and agree to submit annual activity reports as required by the Master Woodland Manager program. I will use reasonable care in using the program's property and equipment. I agree to represent the Master Woodland Manager program as described in the program materials and further agree not to misrepresent myself as having skills or professional training beyond those provided in the Master Woodland Manager program. I agree to avoid conflicts of interest between my personal or business activities and clientele of the Master Woodland Manager program. Such conflicts of interest may include property transactions, timber transactions or the offering of goods or services while representing myself as providing volunteer services under the auspices of the Master Woodland Manager program.

Signature:

Date:



I authorize Oregon State University (OSU), and those acting pursuant to its authority to:
Record my name, likeness, voice, participation, comments, appearance or any
combination of these; in audio/visual media, including, but not limited to, video, sound
and photographic still imaging; or written material; on or around this date; on the following
topic: **Master Woodland Manager Training**

These recordings, statements and written material may be disclosed to the general public
for the purpose of publicizing and promoting OSU; in any medium, present or future,
including but not limited to print, Internet, social media networks, direct public
presentations, speeches, video or audio.

The institution may further release, exhibit, authorize the use of and distribute such
recordings and materials, in whole or part, without restrictions or limitation throughout
the universe, for any educational or promotional purpose which Oregon State University
and those pursuant to its authority deem appropriate. I waive any right to inspect
or approve the finished product, or the use to which it may be applied. I recognize and
authorize that release of such materials may often be made to, and used by the public
news media or other entities over which Oregon State University has no control; and for
which Oregon State University bears no responsibility.

I understand that Oregon State University is not responsible for the unauthorized use of
my name, likeness, voice, printed or biographical material by these third parties,
including, but not limited to the news media; web sites; downloading of images and
videos from the Internet or social media networks such as YouTube, Facebook or Flickr;
or other distribution networks that may be developed; now or in the future.

I represent that: (i) unless signed by a parent or legal guardian below, I am at least 18
years of age; and (ii) I have read the above and fully understand it, and am knowingly and
voluntarily executing this release without compensation.

Full Name (printed):

Signature:

Date: