



## 2019 Bastrop County Master Gardener Application

I wish to become a Master Gardener in Bastrop County and be accepted in the Master Gardener training program offered by Texas AgriLife Extension Service. I understand that in exchange for the training made possible through Extension, I will volunteer at least 50 hours of my time to Bastrop County's Master Gardener within 1 year of completion of the program. I understand that I will become a Certified Master Gardener when I complete the training and volunteer work.

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

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

Email: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: Mobile: \_\_\_\_\_ Other: \_\_\_\_\_

### Please Complete the following:

Years of Gardening Experience: \_\_\_\_\_

Type of gardening experience and related training: \_\_\_\_\_

\_\_\_\_\_

Number of years living in Bastrop County: \_\_\_\_\_

List areas of specialization or hobbies (e.g. flowers, vegetables, ornamentals, house plants, community gardening, fruit trees, etc.)

\_\_\_\_\_

\_\_\_\_\_

List experience in working with each type community: schools, youth churches, senior citizens, hospitals, halfway houses, etc.

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Please list group affiliations: garden clubs, community gardens, plant societies, etc.

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How did you learn of the Master Gardener Program? \_\_\_\_\_

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Why do you want to become a Master Gardener? \_\_\_\_\_

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Are you presently employed, and if so, where? \_\_\_\_\_

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Times available for volunteer work (please circle):

- Morning
- Afternoon
- Evening
  
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

To become a Master Gardener is important to me because: (0-Not Important 5-Most Important, please circle):

1. I will be able to increase my knowledge of gardening. 0 1 2 3 4 5
2. I will be able to gain new skills as a gardener. 0 1 2 3 4 5
3. I will have the opportunity to receive useful training. 0 1 2 3 4 5
4. I will be able to provide a service to other people in my community and/or neighborhood. 0 1 3 2 4 5
5. I will have the opportunity to share my knowledge with other gardeners. 0 1 2 3 4 5
6. I will gain a great deal of personal satisfaction. 0 1 2 3 4 5
7. I will be able to creatively use my free time. 0 1 2 3 4 5
8. I will be certified by Texas AgriLife Extension Service. 0 1 2 3 4 5
9. I will receive free instruction and materials. 0 1 2 3 4 5
10. I will gain gardening experience that can help me get a job. 0 1 2 3 4 5
11. I will be recognized by people in my community. 0 1 2 3 4 5
12. I can get a tax credit for my volunteer work. 0 1 2 3 4 5

Please make checks payable to "BCMGA" and submit payment and documents by mail or hand-deliver to the Bastrop County Extension Office no later than close of business **December 10, 2018**.

Bastrop County Master Gardener Association  
901 Pecan Street  
Bastrop, Texas 78602