

# Texas A&M AgriLife Extension—Guadalupe County

## Application for Master Gardener Class 32

January 15 – May 14, 2019

Every Tuesday  
5:45-8:45p.m.

Extension Office  
210 East Live Oak  
Seguin, TX 78155



**Application Deadline**  
**January 14th, 2019**

By making this application you state your pledge to become a Certified Member of Guadalupe County Master Gardeners (GCMG). Understand that in doing so you make a substantial commitment to further the mission of educating others in sound horticultural practices. Your obligations are summarized in items 3 and 4 below.

**1. Your Contact Information** (Please print legibly.) The information you provide in section 1 will be included in a roster given to fellow classmates and the general GCMG membership. You too will receive these rosters. This information is not to be shared with others.

Name:		Day phone
Home Address		Night phone
City	County	Cell Phone
Zip	Email address	

**2. Additional information.** This information is not included in rosters

Check <input checked="" type="checkbox"/> one	And tell us a little more...
<input type="checkbox"/> Employed	Where?
<input type="checkbox"/> Retired	Profession you retired from
<input type="checkbox"/> Other	Please explain

**3. What GCMG Requires You do between Jan. 2019 & May 2020 to become a certified Master Gardener:**

Initials ↓	By initialing each item below, I agree, that as a GCMG Student/Intern, I will:
_____	a. <b>Pay tuition by attaching \$210.00</b> to this application.
_____	b. <b>Undergo a personal background check</b> as required by Texas AgriLIFE EXTENSION (cost is included in tuition fee).
_____	c. Attend a <b>minimum of fifty (50) hours of classroom and field instruction;</b>
_____	d. <b>Complete open-book, take-home tests</b> given on specific subjects;
_____	e. Give a <b>minimum of fifty (50) hours of volunteer service</b> in GCMG approved projects within one year (May 2020) of completing the training program;
_____	f. <b>Report volunteer hours worked</b> each month

**4. What GCMG expects of you once you become a Certified Member:**

Initials ↓	Once I become a certified Master Gardener. I further commit to:
_____	a. <b>Use the knowledge I gain to educate the public on sound horticultural practices</b> and do my best to accomplish the GCMG mission and goals.
_____	b. <b>Continue as an active member</b> of GCMG by: <ul style="list-style-type: none"> <li>▶ Performing a minimum of <b>twelve (12) hours of volunteer service annually;</b></li> <li>▶ Attending <b>six (6) hours of approved continuing education annually;</b></li> <li>▶ <b>Reporting volunteer hours</b> on a regular basis;</li> <li>▶ <b>Paying annual local dues (dues were \$20.00 for 2018)</b></li> <li>▶ <b>Updating a personal background check</b> every three years, or as required</li> </ul>

**5. Master Gardeners’ commitments to you. Now and in the future,** Guadalupe County Master Gardeners, Inc. and Texas A&M AgriLife Extension Service will:

- ▶ **Make you feel welcome** as part of the GCMG family;
- ▶ **Provide you quality training** and associated materials;

Maintain accurate records of the volunteer hours you report;

- ▶ **Facilitate your continued learning** through regular meetings, activities and newsletters;
- ▶ **Provide opportunities for you to become a certified instructor** in an array of specializations;
- ▶ **Create opportunities for you to practice what you teach;**
- ▶ **Provide opportunities for volunteer services** at GCMG approved projects;
- ▶ **Welcome your full participation** in the business affairs of the organization

We want you to understand that you are signing up for more than just taking gardening classes.

If you need more details, visit our website, [www.guadalupecountymastergardeners.org](http://www.guadalupecountymastergardeners.org), to see the **GCMG Mission, Bylaws, and Operating Guidelines**...and current and archived issues of our **Award Winning Newsletter**, see the newsletter for upcoming topics and presenters.

**We mean it when we say you are welcomed! Be our guest at our monthly membership meetings,**

6:15 p.m. 3<sup>rd</sup> Thursday of each month  
 Guadalupe County  
 AgriLife Extension/Master Gardeners office  
 210 E. Live Oak Street  
 Seguin, Texas

Please sign below and complete the rest of the application.

Signed \_\_\_\_\_

Date \_\_\_\_\_

### Credit Card Payment Authorization Form

Please sign and complete this form to authorize Guadalupe County Master Gardeners to apply charges to your credit card account listed below for class tuition.

By signing this form you give Guadalupe County Master Gardeners permission and authorization for the following:

- Permission to charge tuition fees for the Master Gardener Class
- I understand that there will be an additional \$6.00 processing fee added to the transaction.

Please Complete the information below:

I  authorize Guadalupe County Master Gardeners to charge my credit card Account indicated below for tuition and fees for Master Gardener Class.

Name as it appears on Card:

Billing Address:

Billing Zip Code:  Phone:

<b>Account Type:</b> <b>Visa</b> <b>MasterCard</b> <b>Discover</b> <b>American Express</b>  <b>Account Number:</b> _____  <b>Expiration Date:</b> ____ / ____ <b>CVV (3 digit number from back of card):</b> _____  <div style="border: 1px solid black; padding: 5px; display: inline-block;"><b>\$216.00</b></div>
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**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above. I certify that I am an authorized signer of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form. Credit card payment will incur a processing fee of \$6.00 per transaction.

## **How to Apply**

- A. Carefully consider the requirements of the Master Gardener Program.
- B. Fill out this application in legible print, answering each question as thoroughly as possible.
- C. Mail or deliver your completed application with a \$210.00 check, money order or credit card by January 14th to:

**Guadalupe County Master Gardeners  
Class 32 Registration  
210 E. Live Oak  
Seguin, Texas 78155**

- D. Questions? Contact the Class Coordinator:

**Kay McElveen  
Class Coordinator  
hkaymcelveen@gmail.com  
479-790-2933**

**Texas A&M AgriLife Extension provides equal opportunities in its programs and employment to all persons, regardless of race, color, sex, religion, national origin, disability, age, genetic information, veteran status, sexual orientation, or gender identity.**

**Individuals with disabilities who require an auxiliary aid, service or accommodation in order to participate in this meeting are encouraged to contact the County Extension Office at (830) 303-3889 at least 5 days prior to determine how reasonable accommodations can be made.**

**Texas Master Gardener Association and Guadalupe County Master Gardeners, Inc. are volunteer service organizations under guidelines established by Texas A&M University and the Texas A&M AgriLife Extension.**



**CONFIDENTIAL**

**Volunteer Application Form**

And consent for criminal background history check authorization/waiver

To be completed by Extension program volunteers (EFNEP, BLT, etc.) and Master Volunteers only. 4-H volunteers must register online via 4-H CONNECT or by completing the 4-H Adult Volunteer Application (4-H 2-1.056)

Please print:

\_\_\_\_\_ Guadalupe \_\_\_\_\_

1. APPLICANT'S FULL, LEGAL NAME 2. COUNTY

\_\_\_\_\_

3. ADDRESS 4. CITY ZIP

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

5. FIRST 5 DIGITS OF SOCIAL SECURITY NUMBER 6. DATE OF BIRTH

\_\_\_\_\_

7. DRIVER'S LICENSE NUMBER (optional) 8. GENDER (circle one) Male / Female

9. Are you of Hispanic ethnicity? Yes / No RACE (circle one) GUADALUPE MASTER GARDENER

White / Black / Asian / American Indian 10. VOLUNTEER PROGRAM AREA

Alaskan Native / Native Hawaiian / Pacific Islander

**Previously Screened**

11. I verify that I have been previously screened including a criminal background check and PASSED.  Yes  No

If yes, by who? \_\_\_\_\_ When (Year): \_\_\_\_\_

For what purpose \_\_\_\_\_

Did you pass? If not, what restrictions were imposed \_\_\_\_\_

If you have been screened and passed a criminal background check through an Extension-approved entity, a letter/proof must be submitted.

**Please sign at the bottom of the form.**

12. I hereby authorize veriFYI and/or its Service Provider and the Texas A&M AgriLife Extension Service to request and receive any and all background information about or concerning me, including, but not limited to, my Criminal History, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers. I authorize the Texas AgriLife Extension Service or any of its components to make reference checks relating to my volunteer service. I understand that this information will be used to determine my eligibility as a volunteer/employee with the Texas A&M AgriLife Extension Service.

The criminal history, as received from the reporting agencies, may include arrest and conviction data, as well as plea bargains and deferred adjudications and delinquent conduct committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge veriFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization and/or procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to veriFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

\_\_\_\_\_

13. Date 14. Applicant's Signature

## Volunteer Application Form Instructions

1. Applicant's Printed Name – Complete with first name, middle name and last name.
2. County – Complete with the county name in which you are applying to be a volunteer.
- 3/4. Address – Complete with your current mailing address, city and zip code.
5. Social Security Number – Complete with at least the **first five** digits of the social security number. The social security number is an individual descriptor that enables the system to complete a national criminal search of 47 jurisdictions.
6. Date of Birth – Complete with the month, day and year of birth.
7. Driver's License Number – Complete with current driver's license number and state. Although optional, this helps affirm your identity during a background check.
8. Gender – Complete by circling one of the options.
9. Race – Complete the race and ethnicity section by circling the answers that apply. This field is optional; however, it is very important in confirming accurate identity.
10. Volunteer Program Area – Complete with the program area you are volunteering for (e.g., Better Living for Texans, Expanded Food and Nutrition Education Program, Master Gardener, Master Naturalist, Master Wellness Volunteer). *\*4-H volunteers should complete the Texas 4-H Adult Volunteer Application (4-H 2-1.056).*
11. Previously Screened – Texas A&M AgriLife Extension Service will accept prior screenings conducted within the past three years from other entities. The approved list of prior screenings either as an employee or volunteer include: school districts, churches, youth groups/associations (Little League, sports associations, etc.), youth agencies/organizations (Big Brother/Big Sister, Boy Scouts, Girl Scouts, after school/extended care programs), law enforcement (county, state or federal/prison system), Texas Youth Commission, Department of Defense – Child and Youth Services, Department of Defense – Family Programs, concealed handgun license; and/or licensed childcare workers.  
*\* The minimum requirement is a criminal background check conducted through DPS or a National Criminal Search entity.*  
*\*\* Other sources may be considered based on documentation provided with screening criteria and specifics.*  
*\*\*\* Documentation is required for screenings from other entities. This could include a letter of acceptance from the employer or volunteer group, or a letter written from the screening entity to the Texas A&M AgriLife Extension Service stating you have been screened and tested.*
12. Authorization Statement – State agencies screening volunteers are required by legislation to use the Volunteer Center of North Texas. The Volunteer Center contracts with VeriFYI. VeriFYI is a background verification software system that accesses multi-jurisdiction checks utilizing one of the largest private-sector criminal history databases in the nation (180 million records). All information received is held in confidence and not shared at the county level. Criminal record results are shredded when a volunteer's status is determined.
13. Date Completed
14. Applicant's Signature