



Oregon State University Extension Service
Master Gardener™ Program

PROJECT REQUEST FORM

The mission of the Oregon State University Extension Service Master Gardeners™ is to provide research based educational information and programs and public outreach on sustainable home horticulture through trained and certified volunteers.

Project Request Information:

Contact name _____ Phone # _____

Project name _____ Email _____

Type of project

____ Garden planning ____ Community beautification ____ School Outreach
____ Instruction ____ Educational topic/presentation ____ Other

How many MGs are needed? ____ Number of people involved from your project? ____

What expertise are you looking for? _____

How long will MGs be needed?

Start date _____ End date _____ Times _____

Describe your project:

How will MGs fit into their role as educators in your project? (See mission statement on page one.)

What role do representatives from your organization play in supporting the success of this project?

How many people do you expect to be impacted by this project/event?

Project address or location and map:

If there are costs associated with the completion of this project, how will you fund them?

If this project requires any special tools or props, it is understood that the project organizers are to provide them. Master Gardeners are not expected to operate machinery or carry loads over 30 lbs.

Master Gardeners™ are volunteers of OSU Extension Service and are 'at-will' volunteers. They represent OSU at all times during their time with your organization. At No Time will Master Gardeners be asked to perform duties other than those outlined on this form.

Signature of person submitting form:

Date_____

Title or position: _____

Return form to: **Master Gardener Program Coordinator, OSU Lincoln County Extension Service, 1211 SE Bay Boulevard, Newport, OR 97365**, or fax 541-265-3887 or email it to liz.olsen@oregonstate.edu

Returning this form does not guarantee acceptance of the project. Some projects do not fit the educational criteria or schedules may be full at this time. Call 541-648-6814 for more information.

For Office Use Only: ACCEPT _____ DECLINE _____ DATE: _____ INITIALS _____

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