



Request for Master Gardener Volunteers
Jefferson County Master Gardener Volunteer Program
Organization Requesting Assistance

Name: _____

Address: _____

Contact Person: _____ Phone: (____) _____ Cell _____
Email (print clearly) : _____

Location of Activity: _____

Date(s) of Activity: _____ Time(s) of Activity: _____

Description of Activity (Please complete a separate sheet for each activity):

*** *Reminder - all Master Gardener activities need to include horticulture education.*

****Master Gardeners should not be considered free labor*

- Lecture - Topic requested: _____
- Hands on Demonstration - Subject requested: _____
- Landscape project: _____
- School project
- Other -

Describe: _____

Estimated Number of Volunteers Required: _____

Commitment (per volunteer): _____ hours per _____ for _____ week(s)

Volunteer(s) will be working primarily with: Seniors, Adults, Youth,
ages _____

Estimated number of people involved in activity/project: _____

Does this Volunteer Opportunity interfere with or take away from any job duties that normally would be performed by an employee of requesting organization? (Please circle response.) YES NO

Please return completed form to:

Alabama Cooperative Extension System, 2612 Lane Park Rd, B'ham, Al 35223
(attn: Tony Glover, Regional Extension Agent) (email to: gloveta@aces.edu)