



LOUISIANA MASTER GARDENER APPLICATION

For Parishes of Jefferson, Orleans, Plaquemines & St. Bernard
6640 Riverside Dr. Suite 200, Metairie, LA 70003
Phone: (504) 838-1170 | Fax: (504) 838-1175
www.lsuagcenter.com/gno



Training Summer 2009 – June 15th through August 6th

Classes will be held Monday & Thursday from 9:00 a.m. – 12:00 p.m.
New Orleans Botanical Garden, City Park

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Day: _____ Night: _____

Email: _____

To graduate and become a Louisiana Master Gardener, no more than two of fifteen training sessions may be missed, a take-home final exam must be passed with at least 70% accuracy and the following volunteer commitment must be met within 12 months of graduation from the class.

Upon graduation, I agree to 40 hours of volunteer service to the Louisiana Cooperative Extension Service with at least 10 of the 40 hours required to be spent providing help at the Extension Service offices in Jefferson and Orleans parishes. I also agree to work a total of at least six (6) hours at the Spring or Fall Garden Shows at the New Orleans Botanical Garden and I agree to attend at least four meetings of the Master Gardeners of Greater New Orleans.

Topics to be covered in the 15 training sessions include (order & topics subject to change):

- | | |
|---|--|
| 1. Botany/Lab (Monday, 6/15/09) | 9. Plant Pathology (Monday, 7/13/09) |
| 2. Organic Gardening (Thursday, 6/18/09) | 10. Diagnostics (Thursday, 7/16/09) |
| 3. Vegetables (Monday, 6/22/09) | 11. Ornamental Horticulture, Landscape Construction & Bed Preparation (Monday, 7/20/09) |
| 4. Fruits & Nuts (Thursday, 6/25/09) | 12. Lawn Care (Thursday, 7/23/09) |
| 5. Annuals, Perennials, Herb Gardening (Monday, 6/29/09) | 13. Soils & Fertility (Monday, 7/27/09) |
| 6. Weeds (Thursday, 7/02/09) | 14. Roses (Thursday, 7/30/09) |
| 7. Pesticide Safety & Horticulture Law's & Regulations (Monday, 7/06/09) | 15. Field Trip (Monday, 8/03/09) |
| 8. Basic Entomology (Thursday, 7/09/09) | 16. Graduation (Thursday, 8/06/09) |

The course fee of \$75 covers the cost of the handbook and supplemental supplies. **As a Master Gardener, I promise not to use my title in connection with any commercial enterprises or to promote any commercial products.** My signature is verification that I have read the above guidelines and that I am willing to abide by them.

Signature: _____ Date: _____

Your completed application form and \$75.00 registration fee are both due June 1, 2009. Please make your check payable to "MGGNO" for Master Gardeners of Greater New Orleans and mail to:

Brent Jeansonne
Master Gardener Coordinator
LSU AgCenter
6640 Riverside Dr. Suite 200
Metairie, LA 70003

Questions?
Call: (504) 838-1170
Fax: (504) 838-1175
Email: bjeansonne@agcenter.lsu.edu
Visit: www.lsuagcenter.com/gno



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EXPERIENCE AND INTERESTS:

Please be specific in providing all of the following information. Use back of page if necessary.

1. Gardening Experience - Please list the number of years you have gardened and location(s) where your gardening experience took place.

	No. of Years	Location (City, State)
Vegetable garden		
Flower beds		
Fruit trees/vines/bushes		
Outdoor landscape/lawn		
Indoor plants		

2. Please list your favorite (up to three) areas of gardening interest or specialization (example: roses, vegetables, greenhouse plants, annuals, perennials, etc.).

1. _____
2. _____
3. _____

3. Please list any civic, church, garden, or other groups in which you are or have been a member, and any office held or activity you participated in while a member of the organization.

Group	Office Held or Activity	Years

4. Please list any other volunteer work you have done.

For Whom	Type of work	Years



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5. Please list some of your hobbies or talents other than gardening.

6. Please list skills that you possess which could be used to strengthen our Master Gardener program (example: writing, editing, public speaking, coordination or management of other volunteers, graphic design, computer word processing, data entry or web page maintenance, etc).

7. What is your current occupation and work schedule, if any?

8. What days and times are you available for Master Gardener activities? Please check all that apply.

	MON	TUE	WED	THR	FRI	SAT
Morning						
Afternoon						
Evening						

Comments on days/times:

9. What days and times are you not available for Master Gardener activities? Please check all that apply.

	MON	TUE	WED	THR	FRI	SAT
Morning						
Afternoon						
Evening						

Comments on days/times:



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10. Why do you want to become a Master Gardener?

11. Please indicate your level of interest in the following by circling the appropriate number. Keep in mind that you will be trained for specific tasks, if needed.

	Interested			
	Not	Somewhat	Very	Extremely
Gardening consultations for individuals	1	2	3	4
Diagnosis of plant problems	1	2	3	4
Maintain demonstration garden	1	2	3	4
Maintain demonstration greenhouse	1	2	3	4
Community garden plots and demonstrations	1	2	3	4
School garden plots and demonstrations	1	2	3	4
Gardening presentations to groups	1	2	3	4
Community beautification projects	1	2	3	4
Writing articles, newsletters, etc.	1	2	3	4
Planning future Master Gardener programs	1	2	3	4
Manning gardening displays	1	2	3	4
Creating gardening displays	1	2	3	4
Answer telephone gardening questions	1	2	3	4
Assisting Agent in administering MG program	1	2	3	4
Working in Extension Office (filing, copying, etc.)	1	2	3	4
Community service projects	1	2	3	4
Fund-raising concessions at activities	1	2	3	4
Coordinating Master Gardener projects	1	2	3	4

12. Please indicate by circling your level of interest in working with the following types of people.

	Interested			
	Not	Somewhat	Very	Extremely
Children - preschool or elementary age	1	2	3	4
Youth - junior or senior high age	1	2	3	4
Adults	1	2	3	4
Senior citizens	1	2	3	4
Physically handicapped	1	2	3	4
Mentally handicapped	1	2	3	4
Limited income	1	2	3	4



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	Yes	No
15. Do you have a vegetable garden?	_____	_____
16. Do you grow annuals/perennials?	_____	_____
17. Do you have an herb garden?	_____	_____
18. Do you have a greenhouse?	_____	_____
19. Do you have houseplants?	_____	_____
20. Do you have fruit trees/vines/bushes?	_____	_____
21. Do you dry flowers or other plants?	_____	_____
22. Do you enjoy working in your yard?	_____	_____
23. Have you spoken to groups of people on gardening?	_____	_____
24. Have you done any landscape design?	_____	_____
25. Have you done any landscape construction?	_____	_____

26. In what areas of horticulture are you especially interested?

27. Please provide any other information about yourself that may help us select you for admission to the Louisiana Master Gardener training program.
