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# 2026 MASTER GARDENER APPLICATION PACKET

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The Anderson County Master Gardener program is a volunteer service organization offered by The University of Tennessee Extension. The purpose of the Master Gardener program is to train citizens as horticulture educators for their communities.

The title **Master Gardener** is conditional upon complying with the following:

- Successfully completing the Master Gardener training program,
- Performing and reporting 40 service hours within 12 months of training program completion,
- Attending 4 Master Gardeners of Anderson County Association meetings per year,
- Sharing only University of Tennessee-approved recommendations (not home remedies but research-based information),
- The Master Gardener name badge and title may not be used for commercial gain or to promote commercial products or businesses; and
- Certification is renewable annually, upon completion of volunteer and educational requirements.

**Included in this application packet are the following forms:**

- **Extension Volunteer Form**
- **TEMG Training Agreement**
- **Training Class Schedule**

**This asynchronous training program will involve weekly webinars and in-person sessions. You can view the weekly webinars at anytime during the week and plan to attend each in-person session on Tuesday afternoons. These sessions will involve various hands-on activities, field trips, and workshops.**

**Tuesday afternoon from 1:00pm to 3:00pm starting February 3 to April 28, 2026.**

**Roane State Community College Oak Ridge Campus 701 Briarcliff Ave. Oak Ridge, TN.**

Please review and complete all forms in this packet.  
Incomplete application packets will not be considered.

**Rolling application until Tuesday, January 20th 2026 and should be sent to:**  
**Anderson County Extension, 100 N. Main St. Room 213 Clinton, TN 37716 OR emailed to ACMGA Coordinator, Seth Whitehouse at [whitehouse@tennessee.edu](mailto:whitehouse@tennessee.edu)**

Master Gardeners frequently interact with children. A check against the Sexual Offenders registry is required by the University of Tennessee for all volunteers working with children. Please note that the Background Disclosure section of this application must be completed before acceptance to the Master Gardener program. **Please do not send payment with this application.** Payment of the \$200 training fee may be made after you receive notification your application has been approved and accepted.



## SECTION 1 - TENNESSEE EXTENSION VOLUNTEER APPLICATION FORM

Level 1 volunteers should only complete Sections A - E. Level 2 and Level 3 volunteers should complete the entire form.

Tennessee Extension aims to provide a safe environment for all persons involved in Extension activities and events. This application is designed to be an information-gathering aid in order to successfully match the applicant's skills and interest with the appropriate service and needs of the organization. Answers given by the applicant may be verified. All applications will be filed in a secure location.

### A. GENERAL INFORMATION

\*Must present your Driver's License or a government issued photo ID with your application\*

Name \_\_\_\_\_

Home Address \_\_\_\_\_  
Last First Middle Name  
Street, Route, Apt #  
City, State Zip code County

Mailing Address (if different from above) \_\_\_\_\_

Email address: \_\_\_\_\_ How long have you resided in this county? \_\_\_\_\_

Telephone: Daytime \_\_\_\_\_ Evening \_\_\_\_\_

Best time to call: ☐ Morning ☐ Afternoon ☐ Evening

Have you previously volunteered with TN Extension? ☐ Yes ☐ No

If yes, county and last year volunteered? \_\_\_\_\_

### B. DEMOGRAPHIC INFORMATION

Gender: ☐ Female ☐ Male Ethnicity: (check one) ☐ Not Hispanic/Latino ☐ Hispanic/Latino

Race: (check one) ☐ White ☐ Black /African American ☐ Native American Indian/ Alaskan Native  
☐ Asian ☐ Native Hawaiian / Other Pacific Islander

Are you able to speak or write in a language other than English? ☐ Yes ☐ No

(Please list, including American Sign Language.) \_\_\_\_\_

### C. AVAILABILITY

What length of time are you willing to volunteer? Over what time period? (Check all that apply)

\_\_\_\_\_Hrs. /week \_\_\_\_\_Hrs. /month ☐ 1-3 months ☐ 3-6 months ☐ 6-12 months ☐ Ongoing

When are you available to volunteer? (Check all that apply)

☐ Day ☐ Evening ☐ Weekends ☐ I'm flexible Specific times: \_\_\_\_\_

### D. AUDIENCE INTERESTS

I prefer to work directly with: (Check all that apply)

☐ Youth ☐ Adults ☐ Senior Citizens ☐ Clientele with disabilities ☐ Other \_\_\_\_\_

If you work directly with youth, what age level(s) do you prefer? (Check all that apply)

☐ Pre-school ☐ K-3 ☐ Explorer (4<sup>th</sup> grade) ☐ Junior (5<sup>th</sup> - 6<sup>th</sup>) ☐ Jr. High (7<sup>th</sup> - 8<sup>th</sup>)

Senior: ☐ Level I (9<sup>th</sup> - 10<sup>th</sup>) ☐ Level II (11<sup>th</sup> - 12<sup>th</sup>)

**E. ACTIVITY INTERESTS** - What are your volunteer activity interests? (Check all that apply)

- ☐ Teaching/ demonstrations
- ☐ Photography
- ☐ Newsletter
- ☐ Displays/exhibits
- ☐ Organizing programs/events
- ☐ Public Speaking
- ☐ Telephone/office work at county Extension office

- ☐ Writing/publishing/proofreading
- ☐ Web development
- ☐ Artworks, graphics
- ☐ Marketing
- ☐ Research/data collection
- ☐ Typing/ Computer entry
- ☐ Fundraising

\*If you are interested in a specific program or topic area such as 4-H Youth Development, Agriculture, Natural Resources, and Community Economic Development, Master Gardener, or Family and Consumer Sciences, please see Section 3 - Program Area Information Forms.

*\*F & G below are not required for Master Gardeners/ Level 2 and Level 3 volunteers only\**

**\*F. REFERENCES** - List three people, not related to you, who have knowledge of your qualifications and have known you for at least two years. Provide complete addresses and phone numbers.

1.	Name	Street Address	City/State/Zip
	Day Phone Number	Evening Phone Number	Email Address Relationship
2.	Name	Street Address	City/State/Zip
	Day Phone Number	Evening Phone Number	Email Address Relationship
3.	Name	Street Address	City/State/Zip
	Day Phone Number	Evening Phone Number	Email Address Relationship

**G. BACKGROUND DISCLOSURE** - A "yes" answer does not automatically exclude an applicant from becoming a registered Extension Volunteer. If there are any changes in answers to the following questions, the volunteer should immediately contact the local Extension office and notify the change.

1. Have you ever had any criminal conviction related to:
  - a. A crime of violence? ☐ Yes ☐ No
  - b. Child abuse or neglect? ☐ Yes ☐ No
  - c. Sexual related offenses? ☐ Yes ☐ No
2. If yes, to any of the above questions, provide date(s), location(s), and complete name at the time(s).

I authorize contacting the references listed on this application. I understand the omission or misrepresentation of information requested may result in non-appointment or dismissal as an Extension volunteer. If appointed as a volunteer, I agree to abide by the policies of UT Extension, and the University of Tennessee, and Tennessee State University and to fulfill my volunteer responsibilities to the best of my abilities. I also understand that UT Extension, the University of Tennessee and/or Tennessee State University may contact other individuals as needed to verify my skills, background, and experience in working with Extension clientele.

I acknowledge that I have received and read the Tennessee Extension Volunteer Statement of Principles (all volunteers). I acknowledge that I have received and read the University of Tennessee Programs for Minors Safety Policy and Standards of Conduct for Covered Adults (Levels 2 & 3 volunteers).

I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.

Applicant's Signature

Date

FOR OFFICE USE ONLY: Date application was received: \_\_\_\_\_

This applicant: (Pick one)

- ☐ Met qualifications for an Extension volunteer position.
- ☐ Did not meet qualifications for an Extension volunteer position.

Volunteer Level: ☐ 1 ☐ 2 ☐ 3

# AGRICULTURE, NATURAL RESOURCES, AND COMMUNITY ECONOMIC DEVELOPMENT

**GENERAL VOLUNTEER** - Please select which areas of volunteer opportunities interest you.

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Beef                 | <input type="checkbox"/> Fruits & Vegetables     | <input type="checkbox"/> Small Ruminant |
| <input type="checkbox"/> Beekeeping           | <input type="checkbox"/> Leadership              | <input type="checkbox"/> Swine          |
| <input type="checkbox"/> Business Development | <input type="checkbox"/> Ornamental Horticulture | <input type="checkbox"/> Tobacco        |
| <input type="checkbox"/> Dairy                | <input type="checkbox"/> Poultry                 | <input type="checkbox"/> Other: _____   |
| <input type="checkbox"/> Equine               | <input type="checkbox"/> Row Crops               | _____                                   |

## **MASTER GARDENER**

Why do you wish to become an Extension Master Gardener Volunteer? \_\_\_\_\_

\_\_\_\_\_

Do you have any experience or interests that you feel would be beneficial to the Master Gardener program? \_\_\_\_\_

\_\_\_\_\_

Years of gardening experience? \_\_\_\_\_

Would you like to work with home gardeners? ☐ Yes ☐ No

Which of these do you consider to be your areas of expertise?

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Vegetable gardening | <input type="checkbox"/> Lawns & turf grass | <input type="checkbox"/> Flower gardening             |
| <input type="checkbox"/> Community gardens   | <input type="checkbox"/> Herb gardening     | <input type="checkbox"/> Landscape design             |
| <input type="checkbox"/> Trees/shrubs        | <input type="checkbox"/> Native plants      | <input type="checkbox"/> Diseases/insects             |
| <input type="checkbox"/> Wildlife gardening  | <input type="checkbox"/> Houseplants        | <input type="checkbox"/> Water-conservation gardening |
| <input type="checkbox"/> Ornamental ponds    | <input type="checkbox"/> Other: _____       |   |

Other volunteer experiences in your community:

- |                      |                        |
|----------------------|------------------------|
| Volunteer Position   | Organization Name      |
| Organization Address | Organization Telephone |
- |                      |                        |
|----------------------|------------------------|
| Volunteer Position   | Organization Name      |
| Organization Address | Organization Telephone |

I understand the title Extension Master Gardener is conditional upon receiving training, performing 40 service hours and reporting those hours. Tennessee Extension Master Gardeners are expected to use only University of Tennessee-approved recommendation. The Extension Master Gardener name badge and title may not be used for commercial gain or to promote commercial products or businesses.

Applicant's Signature

Date

# TEMG Training Agreement

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- The title Master Gardener Intern is given to those currently enrolled in the Tennessee Extension Master Gardener (TEMG) training program who has not yet completed the certification requirements.
- The certification requirements for a Tennessee Extension Master Gardener are as follows:
  - Attend a minimum of 80% of the scheduled class sessions for the training program.
  - Perform and report 40 hours of service work within 12 months of beginning the training program.
- Certification is renewable annually upon completion of volunteer and educational requirements.
- The Master Gardener name badge and title may not be used for commercial gain or to promote commercial products or businesses
- The title Master Gardener is conditional upon complying with the following:
  - Full TEMG certification as outlined above.
  - Sharing only University of Tennessee-approved recommendations (not home remedies but researched-based information),
  - Appropriate usage of the Master Gardener name badge and title as outlined above; and
  - Annual recertification as outlined above.

I, \_\_\_\_\_ have read, understand, and agree with the above statements.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Programs in agriculture and natural resources, 4-H youth development, family and consumer sciences, and resource development.  
University of Tennessee Institute of Agriculture, U.S. Department of Agriculture and county governments cooperating.  
UT Extension provides equal opportunities in programs and employment.

# 2026 INTERN TRAINING SCHEDULE

Date 1:00 - 3:00pm	Class Topic	Date 1:00 - 3:00pm	Class Topic
<b>Tuesday, February 3</b>	Welcome to ACMGA!	<b>Tuesday, March 24</b>	Entomology / Insect ID and Integrated Pest Management
<b>Tuesday, February 10</b>	Intro TEMG / Ongoing Anderson County projects	<b>Tuesday, March 31</b>	Plant Pathology / Community garden field trip
<b>Tuesday, February 17</b>	Environmental Stewardship / Property mapping	<b>Tuesday, April 7</b>	Turf & weeds / Weed ID
<b>Tuesday, February 24</b>	Soil Management / Soil sampling and results	<b>Tuesday, April 14</b>	Landscape design / Nursery field trip
<b>Tuesday, March 3</b>	Basic Botany / Seed starting and propagation	<b>Tuesday, April 21</b>	Woody ornamentals/ UT Arboretum tree walk
<b>Tuesday, March 10</b>	Vegetables / Grafting workshop	<b>Tuesday, April 28</b>	Supporting Pollinators / Haw Ridge wildflower hike
<b>Tuesday, March 17</b>	Fruit / Orchard field trip	<b>Tuesday, May 5</b>	ACMGA monthly meeting Anderson County Highlights

# **2026 INTERN NOTES**

- **YOU WILL BE RESPONSIBLE FOR VIEWING EACH WEEKS WEBINAR**
- **WE ENCOURAGE YOU TO ATTEND EACH SESSION IN-PERSON THAT WILL FOLLOW ALONG THE WEEKLY WEBINAR TOPIC**
- **MARK YOUR CALENDAR: DECEMBER 1, 2026 IS OUR MONTHLY MEETING WITH INTERN REFLECTION & GRADUATION**
- **MAY 2027: LAST DATE TO GAIN AT LEAST 40 VOLUNTEER HOURS**
- **SETH WHITEHOUSE IS YOUR MASTER GARDENER COORDINATOR FOR ANY QUESTIONS YOU MAY HAVE!**

**WHITEHOUSE@TENNESSEE.EDU OR (865) 226-9452**