

# Master Gardener Volunteer Project Request

Project Name:

Location:

Address:

City:

Contact Person at Location:

Phone:

E-Mail:

Description of Project:

Start Date:

Duration:

# of Master Gardeners:

Cost of Project:

Source of Funding:

This is not a free labor program. Master Gardener volunteers serve as educators, advisors and helpers. A project may be a one-time or a preferably an ongoing project with Master Gardener continuing education and maintenance. The sponsoring organization would be welcome to assist.

Other Project Details:

Proposed by:

Date:

## Committee Use Only:

Projects Committee: \_\_\_\_\_

County Extension Agent: \_\_\_\_\_

Approval: \_\_\_ Yes \_\_\_ No MG Chair