2017 OSU Metro Master Gardener ™ Volunteer Log Sheet

ntern MG_ /eteran MG		Year you became an MG Would you like a yearly Certificate of Appreciation? YES NO					Office Use	
NAME	ss		BUONE COUNTY					
	VOLUNT	EER HOURS				Date rcvd		
05	otal SU MG Program Activity ours	Total Partner Activity Hours	Total Veteran Continuing Recertification Hou		Total Lbs. of Produce (optional)	• Donated	_	

Veterans - 20 total hours required (a *minimum* of 10 should be OSU Metro MG Program Activities)
Plus 10 total hours Veteran Continuing Education/Recertification Hours

Interns 56 Total hours required (a minimum of 28 should be OSU Metro MG Program Activities)

PROGRAM ACTIVITIES: Describes Master Gardeners volunteering on behalf of OSU Extension at pre-approved Metro MG program primary activities only: Phone clinics and MG program clinics at Farmers' markets (may also include OSU Metro MG program designated garden shows, fairs, garden centers, Metro Zoo, Blue Lake Park, etc.) and Garden Educators (Speakers' Guild, 10-Minute U, or School Garden Educators).

PARTNER ACTIVITIES: Describes ALL other educational or support activities designated and pre-approved by the OSU Metro MG program that support or enhance the OSU Metro Master Gardener program.

VETERAN CONTINUTING EDUCATION/RECERTIFICATION: Describes your continuing education/recertification classes and workshops that are pre-approved by the OSU Metro MG Program (see *Options). 10 hours are required annually to remain an active Master Gardener. *Options include Fall Recertification Training, MG Program Workshops, MG on-line training modules, program approved garden education opportunities designated at http://calendar.oregonstate.edu/today/month/metro-gardening or successfully pass take home recertification test. Complete by 10/1/2017.

Lbs. of Produce Donated (optional) – Produce donated from your private garden or community garden to area food banks.

Services that *do not qualify* as **Volunteer Hours -** service performed (*not pre-approved* by the OSU Metro MG program) on behalf of another organization, attendance at training/classes/or workshops or activity where you receive pay.

2017 Master Gardener™ Volunteer Log Sheet

Date	Project or Activity Description and Location	Program Activity Hours	Partner Activity Hours	Veteran Continuing Education/ Recertification Hours (Program approved)	Lbs. of Produce Donated (optional)
	Subtotals from this page \rightarrow				

Add subtotals from all pages and transfer totals to front page.