June 11, 2018

Dear Prospective Master Naturalist,

Thank you for your interest in the University of Illinois Extension Master Naturalist Program. Preparations for the 2018 Master Naturalist Class are underway. The Master Naturalist program educates and trains adult volunteers so they are better equipped to share natural resource information with others and assist with environmental conservation and restoration activities.

Classroom trainings are held on Wednesdays, August 29 to October 31 from 1:00-5:00 pm. We will also have two Saturday sessions on September 22 and October 20 from 8:30 am-3:00 pm. The training sites are in Madison, Monroe, and St. Clair Counties. Most of the sessions will be held at local natural areas and provide hands-on learning opportunities. The fee for the training is $250 and includes a copy of the Illinois Master Naturalist Manual. Sessions include information on invasive plant species, ornithology, herpetology, forests, prairies, and wetlands.

Following the training, you will have many different volunteer opportunities available. Some of our current Master Naturalists assist with bird counts, frog counts, prairie restoration, removal of invasive plant species, and educational outreach.

A Master Naturalist application and brochure is enclosed. After completing the application, return it to a Madison-Monroe-St. Clair Extension Office, 901 Illinois Ave, P.O. Box 117, Waterloo, IL 62298. Please include an initial payment of $125 with your application. Checks should be made payable to University of Illinois Extension. After we receive your application and initial payment, I will contact you to discuss the Master Naturalist program further. Applications are due August 17, 2018. Space for the training is limited, and applications will be processed first come, first served.

If you have questions, please call me at 618-939-3434, or email me at ruth1@illinois.edu. I look forward to receiving your Master Naturalist application.

Sincerely,

Sarah Ruth
Horticulture & Natural Resource Program Coordinator
EXTENSION VOLUNTEER APPLICATION

(To be completed by volunteers in University of Illinois Extension Master Naturalist programs)

Name ___________________________ E-mail ___________________________

Last First Middle

Address __________________________

Street City State Zip

Date of birth ______________________

Month/Day/Year

Phone: Day ____________________ Evening: ____________________ Best time to call: ______________________

Why do you want to become a University of Illinois Extension Master Naturalist?

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_______________________________________________________________________________________________

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_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

Have you had any previous affiliations with the University of Illinois and/or Extension? Yes_______ No ___________

Are you available for classroom training during regular daytime business hours? Yes _______ No____________

Are you available to volunteer time during regular daytime business hours? Yes_________ No_____________

Have you been in another Master Naturalist program? If yes, where and when______________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

Describe your present and previous work experience:

EMPLOYER JOB TITLE YEARS

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

Describe volunteer roles with any other community groups: (List current or most recent experience first.)

ORGANIZATION VOLUNTEER ROLE YEARS

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

List special skills, training and education:

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________
Have you ever been convicted of a criminal offense?  
______ Yes    ______ No (If yes, please attach a sheet to explain.) A conviction will not necessarily disqualify an applicant. A conviction will be considered as it relates to the specifics of the position for which you have applied.

I authorize the University of Illinois to conduct a criminal conviction background check, a DCFS Child Abuse and Neglect Tracking System (CANTS) background check, the national Sex Offender Register, and other sources as necessary.

I understand that I must be officially accepted before beginning my volunteer position. I understand that misrepresentation or omission of facts requested in this application is cause for rejection as an Extension volunteer. I agree to fulfill the responsibilities of this volunteer position to the best of my ability if appointed. I understand that failure to comply with the rules may lead to dismissal from this volunteer position.

Further, I agree to complete Protection of Minors training mandated by University of Illinois Extension and to follow any rules related to the University's Protection of Minors Policy, including mandated reporting to the University of Illinois Police Department (217-333-1216) and a U. of I. Extension employee of the unit for which I am volunteering (e.g., County Director).

Signature ___________________________________________ Date ____________________________

Optional Questions: The following information is being asked to help track our success in attracting a diverse population of volunteers. This information will NOT be used in assessing the applicant’s suitability for serving as a volunteer.

Gender: _____ Male   _____ Female
Residence: _____ Town under 10,000 or rural non-farm   _____ Town/city of 10,000-50,000
   _____ Farm   _____ Suburbs of a city over 50,000   _____ City w/population over 50,000
Ethnicity: (select 1)  _____ Hispanic or Latino   _____ Not Hispanic or Latino
Race: (select one or more)   _____ White   _____ Black/African American   _____ American Indian/Alaskan Native
   _____ Asian   _____ Native Hawaiian/Pacific Islander

Return the application and initial training payment of $125 at your earliest convenience to assure prompt processing. Please contact us if you have any questions or wish further information.

Return to: University of Illinois Extension
901 Illinois Ave.
P.O. Box 117
Waterloo, IL 62298

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