



WASHINGTON STATE UNIVERSITY  
**EXTENSION**



## **Washington State University (WSU) Island County Extension Master Gardener (EMG) Program**

### **Application Process 2026-2027**

The WSU Island County Extension Master Gardener (EMG) Program is a volunteer program for people with a passion for plants, a drive to learn, and a commitment to serving our community. Qualified applicants may have limited experience or knowledge of horticulture, or extensive experience, but all have a desire to learn and share their knowledge with our community.

#### ***Process:***

Step 1: Your foundation (book learning): The EMG journey begins with intensive online training from October 2026 through February 2027. Training combines 13 weekly online modules accessed through WSU's Green School.

Step 2: Local action (volunteer training): The Island County EMG in-person sessions will focus on your volunteer outreach skills. This will include 8 weeks of hands-on learning and field trips. These in-person classes begin in January and extend into March 2027. Following these classes, you will present your capstone project at a Master Gardener meeting in March or May of 2027.

#### ***Washington Green School (WGS) Online course:***

Participants engage with weekly online learning modules, including optional Q&A Zoom sessions, a 29-chapter manual, corresponding quizzes, and a final exam (all open book). Feedback from past participants indicates weekly modules take between 3 and 6 hours. The passing score for quizzes and the final exam must be 80% or higher.

#### ***Island County Extension Master Gardener (EMG) In-Person course:***

Participants engage in weekly in-person learning. This hands-on training is where you learn to be a Master Gardener in Island County. The training includes field trips, as well as plant identification, understanding soils, pest and disease management, noxious weeds, and more. The focus is on skills relevant to your community education volunteer work.

#### ***Costs & Fees:***

The total cost of EMG training is \$275. A required background check costs an additional \$16 and requires you to submit personal information online, including your Social Security number. **If you have already completed the WGS training in the previous year, your volunteer training is available at no charge.**

#### ***Computer access:***

Participants must have computer experience and feel comfortable navigating the internet and using email. Participants will need access to a computer for extended periods.

#### ***Internship:***

Upon successful completion of training, volunteers begin a one-year internship during which they are required to serve at least 50 volunteer hours on projects such as the answer clinic, tabling at

community events, tending demonstration gardens, and youth and adult education, to name just a few of the many volunteer opportunities. Once completed, you will officially be an Extension Master Gardener Volunteer.

**Maintaining Your Certification:**

After the internship year, veteran EMGs serve at least 25 volunteer hours each year, in addition to 10 continuing education hours, to retain EMG certified status.

**Application Instructions:**

Applications are available now and will be **accepted until September 12.**

Deadline extended to  
September 23

**Step 1:** Complete the application and email (scan; no photos), mail, or drop off at the address below. Once we receive your application, we may call you to request additional information.

**Step 2:** Participate in a small group information session. The purpose of this orientation is to familiarize you with the program and the commitment that comes with entering the training and being a Master Gardener. The process includes other prospective EMG applicants and current volunteers. Be prepared to learn more about the program and have questions answered.

**Step 3:** Register for training. Following your orientation session, you will receive notification of acceptance to the program. Included in your acceptance, you will find information about how to complete registration for the Washington Green School online class as well as how to complete your background check.

If you have any questions, please call 360-639-6060 or email [sarah.bergquist@wsu.edu](mailto:sarah.bergquist@wsu.edu). Thanks!

**Mail or Drop off Application:**

WSU Extension Island County  
Master Garden Program  
406 North Main Street  
Coupeville, WA 98239

Office Phone:  
360-639-6060  
Office Hours:  
Monday-Thursday 9 am to 4 pm

**Email Scanned Application:**

[sarah.bergquist@wsu.edu](mailto:sarah.bergquist@wsu.edu)

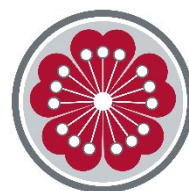
Keep these two pages for your records.

*Extension programs and employment are available to all without discrimination. Evidence of noncompliance may be reported through your local Extension office. Persons with disabilities who require alternative means for communication or program information, or reasonable accommodation need to contact their local Extension office at least 2 weeks prior to the event/activity.*

8/14/2026



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## Washington State University Extension Master Gardener Program

The WSU Extension Master Gardener Program is open to individuals interested in becoming volunteers and sharing gardening and horticulture knowledge with the general public through community outreach. Extension Master Gardener volunteers engage with communities to support stewardship of our soil, water and wildlife, and contribute to food security by using sustainable gardening practices. We welcome applicants of all experience levels and backgrounds who are passionate about increasing their gardening knowledge and giving back to communities through volunteer service.

**To become a WSU Extension Master Gardener Volunteer, you must be 18 years of age or older. Are you 18 years of age or older?** Yes \_\_\_\_\_ No \_\_\_\_\_

*Please complete and return to your local WSU Extension Office*

**Name:**

(First)

(Middle)

(Last)

**Preferred Name:** \_\_\_\_\_

**Mailing**

**Address:**

(Street)

(City)

(Zip)

**Preferred pronouns (circle one):**      she/her      he/him      they/them      other:

**Would you like your pronouns included on your name badge? (circle one)**      Yes / No

**Phone:** Day: (    ) \_\_\_\_\_ Best Time to Call: \_\_\_\_\_

Eve: (    ) \_\_\_\_\_ Best Time to Call: \_\_\_\_\_

**Email Address:**

**Please describe your gardening experience or education/training (personal, volunteer, or work), or if you have not gardened, why gardening interests you:**

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|                                |                             |                     |
|--------------------------------|-----------------------------|---------------------|
| Annuals                        | Herbs                       | Propagation         |
| Perennials                     | Houseplants                 | Greenhouses         |
| Roses                          | Fruit trees                 | Container gardening |
| Lawns                          | Berries and grapes          | Insects             |
| Ornamental grasses             | Trees and shrubs            | Plant diseases      |
| Native plants                  | Pruning                     | Weeds               |
| Wildlife habitat               | Soils                       | Landscape design    |
| Vegetables                     | Composting                  | Water gardens       |
| Wildfire-resistant landscaping | Climate resilient gardening | Waterwise gardening |

Share experiences where you used your time (volunteered) to help others or a cause:

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In the Master Gardener Program, we often rely on volunteers' other skills, interests or experience. What non-gardening skills do you have that you would be willing to share in support of the Program?  
(please check all that apply)

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|------------------------|-----------------------|--------------------------|
| Microsoft Word, Excel, | Drawing/illustrating  | Research/data collection |
| PowerPoint, Outlook    | Fundraising           | Public speaking          |
| Website development    | Writing/publishing    | Teaching                 |
| Graphic design         | Grant writing         | Community organizing     |
| Photography            | Proofreading          | Other _____              |
| Event planning         | Marketing & publicity | Other _____              |

Please provide specific information on the above checked categories: (optional)

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If you are able to speak, read, or write a language(s) other than English (including American Sign Language), please list:

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**Why do you wish to become a WSU Extension Master Gardener volunteer? For example, what do you hope to contribute or gain from participating in the WSU Extension Master Gardener Program?**

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**Is there any other information about your skills, knowledge, training, lived experiences, or abilities you would like us to have?**

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| <b>Photo/Video Release</b> |
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*I understand that, unless noted below, WSU Extension may use photos, video, or audio recordings made of me at events to promote the WSU Extension Master Gardener Program without compensation. I understand that WSU Extension may reveal my name in descriptive text or commentary.*

I do not agree.

|                            |
|----------------------------|
| <b>Personal References</b> |
|----------------------------|

**References:** List non-family members who have knowledge of your skills, abilities, and qualifications. Individuals should have worked with you on projects and activities and/or have direct experience with or knowledge of your qualifications. Please provide complete addresses and phone numbers.

**Name:**

First

Last

Relationship

**Contact**

**Information:**

Home Phone

Work Phone

**Email Address:**

**Name:**

First

Last

Relationship

**Contact**

**Information:**

Home Phone

Work Phone

**Email Address:**

*I authorize Washington State University Extension to contact the listed references. I understand that a criminal background check is required prior to being fully accepted as a volunteer in the program. I understand that misrepresentation or omission of required information is just cause for non-appointment as a volunteer with Washington State University Extension. I understand that I serve at the pleasure of the Washington State University Extension and agree to abide by the policies of Washington State University Extension and individual program areas and to fulfill the volunteer responsibilities to the best of my ability.*

**Applicant Signature:**

**Date:**

Office Use Only:

## Civil Rights Information WSU Master Gardener Volunteers

### ***Confidential & Voluntary***

The WSU Extension Master Gardener program is part of a land-grant university system. The land-grant university system was built on the principle that all people should have access to education. The WSU Extension Master Gardener program wants to ensure we uphold this principle in our work.

Additionally, Washington State University Extension and its programs are federally funded and as such are required by the Civil Rights Act to report demographic information for employees, volunteers and community persons who seek our services. Please complete this form and return it to your local program coordinator. Responses will not be used in the selection process. This page will be removed prior to the application being reviewed.

Our goal for collecting this information is to see how well we uphold the land-grant principle of access to education. We summarize the race, ethnicity, and gender of volunteers and of the people we serve to determine how closely WSU Master Gardener programs are to balanced participation in each county.

Note: Your name will not be reported in conjunction with your Race, Ethnicity and Gender data. The data is reported as an aggregate to USDA-NIFA and names are never included in the reports. Individually identifiable information will be treated as confidential, is not disclosed without (written) consent, and is not included in the review of application to become an Extension Master Gardener volunteer. Your name is only used to record who has reported and who has not in order to accurately report Race, Ethnicity and Gender data.

#### **What is your gender?**

Male  
Female  
Non-binary  
Gender other or unidentified  
Prefer not to respond

#### **What is your ethnicity?**

Hispanic or Latino  
Non-Hispanic or Non-Latino  
Ethnicity unidentified  
Prefer not to respond

#### **What is your race?**

White  
Black or African American  
First Nations / American Indian / Alaska Native  
Native Hawaiian / Pacific Islander  
Asian  
Two or more races  
Race other or unidentified  
Prefer not to respond

***The College of Agricultural, Human, and Natural Resource Sciences (CAHNRS) is committed to creating and maintaining a diverse, equitable, and inclusive learning and working environment for students, staff, faculty, and the communities we serve and in which we operate.***

Extension programs and employment are available to all without discrimination. Evidence of noncompliance may be reported through your local Extension office.

Persons with disabilities who require alternative means for communication or program information, or reasonable accommodation need to contact their local Extension office at least 2 weeks prior to the deadline for application.