

Fairfax Master Naturalists Application Information

Thank you for your interest in becoming a Virginia Master Naturalist with the Fairfax Chapter. We are a volunteer program with chapter members serving as officers and administering the program. Our mission is to train local residents to become certified master naturalist volunteers and to connect volunteers with citizen science, education, and stewardship service projects in parks and natural areas in Fairfax County.

The Basic Training Course, the first step towards initial certification, offers fun and interactive instruction on our local environment taught by recognized experts. Becoming certified typically takes 6 to 12 months. The first step is attendance at all classes and field trips, completion of the final exam, five minute final presentation, and class makeups. Initial certification, as well as annual recertification, requires 8 hours of continuing education and 40 hours of volunteer service. Basic and continuing education are not only meant to be educational but to prepare participants to provide valuable volunteer service as master naturalists to the community. Basic Training Course details are provided below:

- Classes run **February 20th – May 14th 2020** on **Thursdays from 7-10 p.m.**
- Classes meet at the **Fairfax County Government Center**, 12000 Government Center Pkwy, Fairfax, VA.
- Field trips to Fairfax County natural areas will be held four Saturdays during the course from 9 a.m.-3 p.m.
- Attendance at the 12 classes and 4 field trips is mandatory for certification. Up to three classes (or two classes and one field trip) may be made up within 12 months of completion of basic training (e.g., during the next training cycle, with another master naturalist chapter, or by making special arrangements with approval from the Training Committee Chair).
- Students need internet access because course materials and announcements will be provided online.
- Field trips require ability to walk up to four miles.
- Program is targeted toward adults, 18 or older. Youth, age 16-17, may apply under specific conditions.¹
- Class size is limited to 20 trainees with a maximum of two youth.
- Course fee of \$200 covers basic training and course materials. A limited number of need based scholarships are available. To request a scholarship, attach a letter to your application stating your need and the portion of the course fee that you can pay.

Send your completed application and check for \$200 made payable to Fairfax Master Naturalists to the address below. It must be postmarked by **December 28, 2019**.

Fairfax Master Naturalists Application
c/o Jim McGlone
Virginia Department of Forestry
12055 Government Center Parkway, Suite 904
Fairfax, VA 22035

Individuals with disabilities desiring accommodations in the application process should notify the Fairfax County Office of Equity Programs at 703-324-2953/TTY 711 seven days prior to the application deadline.



A Selection Committee reviews the applications using the following criteria: complete application with payment, interest in natural history and becoming a Master Naturalist, prior volunteer experience, natural history training or knowledge gained in other ways, desire to volunteer, leadership experience and time to commit. The acceptance criteria determine selection when there are more applications than spaces in the class. Prior applicants get additional points.

¹ Youth and a guardian must submit applications and course fees. Youth will only be accepted if guardian is also accepted. Each youth member must be accompanied at all trainings, field trips, chapter meetings and activities, and volunteer service by a guardian who is directly responsible for the youth.

Checks will not be cashed unless an applicant is accepted; uncashed checks will be returned. All applicants will be notified by **late January 2020** of their selection status. Questions? Send an email to vmnfairfax@gmail.com.

Fairfax Master Naturalists Application Form

Please type or print clearly and fill in all blanks, use none or not applicable rather than leave a blank

NOTE: The State of Virginia requires a hard copy Application Form with an original signature.

A. GENERAL INFORMATION

NAME		
First	Middle	Last
NAME preferred for FMN badge (e.g., nickname)		
First	Middle (optional)	Last

MAILING ADDRESS		
Address		
City	State	Zip Code

COUNTY OR INDEPENDENT CITY OF RESIDENCE
ARE YOU AT LEAST 18 YEARS OF AGE? If not, list birth month/year and the name of parent or guardian who is also applying to the program.
HAVE YOU APPLIED FOR THE FAIRFAX MASTER NATURALISTS BASIC TRAINING COURSE IN THE PAST?

B. CONTACT INFORMATION

PHONE NUMBER(S)

E-MAIL

EMERGENCY CONTACT
Name

Virginia Cooperative Extension programs and employment are open to all, regardless of age, color, disability, gender, gender identity, gender expression, national origin, political affiliation, race, religion, sexual orientation, genetic information, veteran status, or any other basis protected by law. An equal opportunity/affirmative action employer. Issued in furtherance of Cooperative Extension work, Virginia Polytechnic Institute and State University, Virginia State University, and the U.S. Department of Agriculture cooperating. Edwin J. Jones, Director, Virginia Cooperative Extension, Virginia Tech, Blacksburg; M. Ray McKinnie, Interim Administrator, 1890 Extension Program, Virginia State University, Petersburg. Revised November 2015.

Phone Number	
Relationship	

C. NATURAL HISTORY TRAINING AND EDUCATION

List training and education related to nature, naturalists, natural science, or the environment that you have completed. (e.g., any natural history education classes, workshops, and/or certifications). If none, describe some life experiences that have given you an understanding of natural history and/or the environment.

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D. INTEREST

Describe why you want to be a Master Naturalist; describe some life experiences that have affected your appreciation of nature.

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E. VOLUNTEER EXPERIENCE

Include any current/past volunteer experience, naturalist related or other.

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F. LEADERSHIP EXPERIENCE

Include any current/past volunteer or professional leadership experience, naturalist related or other.

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G. VOLUNTEER AVAILABILITY (approximate number of hours typically available per month)

<input type="checkbox"/> <1 hr	<input type="checkbox"/> 1-2 hrs	<input type="checkbox"/> 3-5 hrs	<input type="checkbox"/> 6-12 hrs	<input type="checkbox"/> >12 hrs
What activities may affect your volunteer availability?				

H. REFERENCES

Please provide 3 references, not related to you, who can verify or discuss your qualifications.

FIRST REFERENCE			
Name			
Phone (Day)		Phone (Evening)	
E-mail			
Relationship			

SECOND REFERENCE			
Name			
Phone (Day)		Phone (Evening)	
E-mail			
Relationship			

THIRD REFERENCE			
Name			
Phone (Day)		Phone (Evening)	
E-mail			
Relationship			

I. How did you hear about the Fairfax Master Naturalists?

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Office Use Only: Applicant #			
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J. DEMOGRAPHIC INFORMATION

(Optional, for record keeping purposes only. This information will be kept in a confidential manner and accessible only to authorized personnel.)

Gender: Female
 Male

Ethnicity: Hispanic or Latino Not Hispanic or Latino

Race (select one or more):
 White
 Black or African American
 American Indian or Alaskan Native
 Native Hawaiian or Pacific Islander
 Asian

Birth Year:

K. DRIVING INFORMATION

Do you have a current and valid driver’s license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, issued in the state of		
Do you have a current commercial driver’s license (CDL)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you currently have the minimum vehicle insurance coverage as required by the Commonwealth of Virginia?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

L. VOLUNTARY DISCLOSURE

*(This information will be kept in a confidential manner and accessible only to authorized personnel. A “yes” answer does **not** automatically exclude you from volunteering with the Virginia Master Naturalist program.)*

Have you ever had any criminal convictions? YES NO

I understand that records and criminal background or reference checks may be conducted on me at any time during the application process or during volunteer service for the Virginia Master Naturalist Program.

Signature, Volunteer

Date

M. VOLUNTEER AGREEMENT

I am volunteering my time to further the missions of the Virginia Master Naturalist program and its sponsoring agencies. I understand that the Virginia Master Naturalist program is open to all, regardless of age, color, disability, gender, gender identity, gender expression, national origin, political affiliation, race, religion, sexual orientation, genetic information, veteran status, or any other basis protected by the law. An equal opportunity/affirmative action employer. I hereby certify that all of the entries on this application are true and complete. I understand that any falsification of information herein constitutes cause for dismissal.

I agree to abide by all policies and procedures of the Virginia Master Naturalist Program and its sponsoring agencies. I understand that Virginia Master Naturalist volunteers serve at the sole discretion of the Virginia Master Naturalist program and its sponsoring agencies. The program or its sponsoring agencies may at any time, for whatever reason, decide to terminate the volunteer's relationship with the organization or to make changes in the nature of their volunteer assignment.

Signature, Volunteer

Date

N. MEDIA RELEASE

The Virginia Master Naturalist Program and its sponsoring agencies periodically use electronic and traditional media (e.g., photographs, video, audio footage, testimonials) for publicity and educational purposes. By my signature on this form, I acknowledge receipt of this document and give permission for the Virginia Master Naturalist program and its sponsoring agencies to use such reproductions for educational and publicity purposes to perpetuity without further consideration from me.

I understand that I will need to notify the Virginia Master Naturalist program if any changes to my situation occur that will impact this media release permission.

Signature, Volunteer

Date

Note: Acceptable forms of signature include signing the hard copy and scanning or mailing it in, signing with Veri-sign, the electronic signature option in Adobe Acrobat, or adding an image of your signature.

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VMN PROGRAM INTERNAL USE ONLY

Date volunteer application received: _____

Date of interview: _____

Date of reference checks: _____

Application requires further action: YES NO

Applicant met qualifications? YES NO

Date acceptance letter sent: _____

Date rejection letter sent: _____

Signature of VMN chapter advisor: _____ Date: _____