

**MASTER GARDENER**  
**UF UNIVERSITY of FLORIDA**  
 IFAS Extension

107 Mehrhof Hall  
 PO Box 110675  
 Gainesville, FL 32611-0675  
 Phone: (352) 392-1831 ext. 331  
 Fax: (352) 392-1413  
<http://mastergardener.ifas.ufl.edu>

Form 10

## Florida Master Gardener Awards and Recognition Form Awards of Excellence

Each county is allowed **ONE ENTRY PER CATEGORY**. Although your Master Gardener Coordinator may have been heavily involved in this effort, only the efforts of the Master Gardeners themselves are to be evaluated. Points will be deducted if it is perceived that most of the effort or submission of entry forms came from the Master Gardener Coordinator.

Only efforts made since the last awards ceremony will be considered by the judges. Any new or re-certified active Florida Master Gardener(s) are eligible. In the event your entry does **not** take top honors in this category this year, we would encourage you to improve your submission and resubmit your entry next year should you *repeat or continue* this project. If your project has won in **ANY** year, it **CANNOT BE RE-ENTERED** again, despite any significant changes in format or participants.

Judges for the awards shall be appointed by the State Master Gardener Program Leader, University of Florida. Decisions by the judges will be final.

### ALL APPLICATIONS MUST BE SUBMITTED IN ELECTRONIC FORMAT

#### SEE BELOW FOR APPLICATION CRITERIA:

The correct and completed award application forms including:

- A typed application form not to exceed 3 pages in length. Supporting materials (where requested may be additional pages)
  - The three pages must include the 150 word project summary.
- 12 point font
- No more than 8 photographs in addition to the three pages of text. (Photos no larger than 8 x 10)
- This form typed and completed including: appropriate category checked
- Name of MG Coordinator (The coordinator must approve application prior to admission)
- Application, photos and supporting materials must all be in PDF format and packaged into one document. Submissions are to be emailed to: [twichman@ufl.edu](mailto:twichman@ufl.edu)

County: Sumter.....

Name of Project: Personal Communications Award.....

Project start date: September 2010..... Project end date: Ongoing.....

Name of person(s) typing application: Susan League.....

Name or names of Master Gardeners preparing application: Susan League.....

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.....

Name of Agent: Jim E. Davis.....

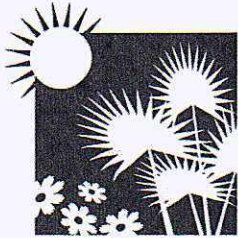
**CATEGORY: Indicate only one category per entry form.** *You must assign your entry to a specific category to be considered for an award in that category.* **Entries are limited to the categories indicated below.**

- |  |   |
|--|---|
| <input type="checkbox"/> Form 11 Beautification                    | <input checked="" type="checkbox"/> Form 18 Personal Communications |
| <input type="checkbox"/> Form 12 Demonstration Garden              | <input type="checkbox"/> Form 19 Service to 4-H and other youth     |
| <input type="checkbox"/> Form 13 Educational Materials Development | <input type="checkbox"/> Form 20 Special Audiences                  |
| <input type="checkbox"/> Form 14 Extension Awareness               | <input type="checkbox"/> Form 22 Written or Verbal Mass Comm.       |
| <input type="checkbox"/> Form 15 County Displays/Exhibits          | <input type="checkbox"/> Form 23 County Master Gardener Newsletter  |
| <input type="checkbox"/> Form 16 General Achievement               |   |
| <input type="checkbox"/> Form 17 Outstanding Master Gardener       |   |

**Email PDF Applications to:**

Tom Wichman  
[twichman@ufl.edu](mailto:twichman@ufl.edu)

**TO BE ELIGIBLE ALL ENTRIES MUST BE RECEIVED BY AUGUST 19, 2013**



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Form 18

## FLORIDA MASTER GARDENER PERSONAL COMMUNICATIONS AWARD

This award category consists of **telephone activities** by Master Gardeners that are **reactive or responsive** in nature. The responses given are to questions or concerns of the public.

To be evaluated on phone calls, he/she will be called and asked to respond to horticultural questions. The individual competing in this area **must** list their phone number at the county office and will be assigned a time and date for the call. If the judges call you at the date and time assigned, and you cannot be located, you will automatically be disqualified from this award category.

In entering this category, you agree to have your conversation with the judges recorded for judging purposes and erased after the judging process is completed. Forms must be **TYPED AND COMPLETED** for consideration by the committee. **Remember to submit Form 10 with your entry.** Entrants are limited to the category they indicate on that form.

Master Gardener Name: Susan League

Phone Number at the County Extension Office: 352-793-2728 Ext. 229

Days of Week Preferred to Receive Calls: Wednesdays 12 Noon until 3 p.m.; Fridays 9a.m. until Noon

Also indicate:

- A. How often person participated in activity: 4 days per week - total 21 hours weekly
- B. Number of calls received (average per hour): 2-3

Entries in this category will be judged on:

1. Information clear and easy to understand (45 points).
2. Accuracy of information (45 points).
3. Style (personality) (10 points).

Please add a few paragraphs describing any problems you encountered when responding to questions over the phone and ideas you have to help other Master Gardeners in this activity.



**Sumter County Extension  
Personal Communications Award Application  
August 2013**

**Problems Encountered and Solutions**

**Problem:** The one-page form previously used to track resident questions was insufficient for tracking types of contacts, gender and ethnicity, and contact information on residents for surveys at year end, as well as accuracy of horticulture recommendations. The form did not allow for getting information to register residents for our mailings (monthly journal or invitations).

**Solution:** A half-page form was created to serve as a platform for getting all required information in a speedy manner.



**MASTER GARDENER PLANT CLINIC LOG**

FORM PC 1S 7-9-2013

<b>Date</b>	<b>MG Name</b>	<b>Contact Type</b> <input type="checkbox"/> Walk In <input type="checkbox"/> Phone <input type="checkbox"/> E-mail
<b>Client Name</b>		<b>If not on the E-Journal mailing list would you like to be?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Already On
<b>Street</b>		<b>Email:</b>
<b>City/Zip</b>		
<b>Phone</b>		<b>EDIS Documents</b>
<b>Question</b>		<b>Action (to be filled in by Master Gardener)</b>

**Insect ID**     Yes

**Turf Disease ID**     Yes

**Plant Disease ID**     Yes

**Follow Up?**     Yes     No