

*TENNESSEE MASTER GARDENER PROGRAM
Request for Inactive Master Gardener Status*

I have completed my initial certification for the Master Gardener Program and I am requesting one year of inactivity for reasons I have discussed with my county Master Gardener coordinator. I will begin inactive status as of (today's date) and therefore forfeit my voting rights and privileges associated with the title Master Gardener until reinstated.

I understand 25 hours of volunteer service and eight continuing education units are required for re-instatement to active status.

I understand that the Master Gardener badge is only to be worn in a volunteer capacity and is not to be worn at work or in any other moneymaking capacity. I will not use my Master Gardener status to promote any commercial activity or private business while inactive. I understand that violation of this policy may cause immediate withdrawal of all certification privileges and any possibility of active status re-instatement.

I understand that if I wish to continue my membership with the local Master Gardener Association it is my responsibility to renew directly with the _____ Master Gardener Association on (one year from today) .

Master Gardener's Signature

Date

County MG Coordinator's Signature

Date