

**Volunteer Activity Request**  
**Master Gardeners of Stark County Ohio**

Program Year: \_\_\_\_\_

Activity Title: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Location: \_\_\_\_\_

MG Activity Leader(s)\*: \_\_\_\_\_

MG Volunteers\*: \_\_\_\_\_

Key Contact from Site: \_\_\_\_\_ Phone: \_\_\_\_\_

Support Staff: \_\_\_\_\_

Approximate Volunteer Hours: \_\_\_\_\_ Activity Budget Total\*\*: \_\_\_\_\_

Description of Activity: (type in this section, within the document; or print form and write on back)  
Include specific details: (i.e., timeline, budget, equipment, supplies, OSUE factsheets, etc.)

Send completed Activity Request Form to:      Maureen E. Austin  
   Agriculture & Natural Resources Educator  
   OSUE, Stark County  
   2650 Richville Drive SE, Suite 100  
   Massillon, OH 44646  
   330.830.7700 ext. 116  
   austin.238@osu.edu

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Recommendation(s) from Master Gardener Coordinator:

Date: \_\_\_\_\_

Master Gardener Coordinator signature for activity approval: \_\_\_\_\_

Date: \_\_\_\_\_

*\*It is the responsibility of the MG activity leader to recruit MG volunteers for the activity.*

*\*\*Submit a detailed budget to the MG Budget Committee for approval.*