

Mississippi Master Gardener Coordinator of the Year

Nomination Cover Sheet

This cover sheet must accompany the nomination supporting documentation.

Previous district winners may be re-nominated in non-consecutive years.

Name of Extension Master Gardener Coordinator: _____

Address: _____

City: _____ Zip: _____ County: _____ District: _____

Has the Nominee been nominated previously? _____ If so, when? _____

Number of years involved with Master Gardener program: _____

Nominator: _____

Address: _____

City: _____ Zip: _____ County: _____

1. Provide a one-page overview (no more than 500 words) of the qualities and skills that the nominee has exhibited as coordinator of your county Master Gardener Program. Include examples of each of the following, as a subject heading and in order (20 points each):
 - a. Positive attributes (i.e. good communicator, enthusiastic, leadership skills, etc.)
 - b. How he/she provides continuing education opportunities for Master Gardeners
 - c. Respects diverse interest and needs of Master Gardeners
 - d. Contributes to Master Gardeners' personal growth and creativity
 - e. Greatest contribution to the Master Gardener program
2. You may include no more than 3 pages of supporting materials (e.g. one page of photos, one news article, and/or one example of other awards/recognition received). These will not be returned. Check items included:
____ Photos ____ News article ____ Awards/Recognition

Signatures

Nominator: _____ Date: _____

Ext. Agent or Chair (other than nominee): _____ Date: _____

Nomination must be postmarked on or before 90 days prior to the current year's MGA State Conference.

Complete and send to:

Dr. Lelia Kelly

State Coordinator – Master Gardeners

P.O. Box 1690

Verona, MS 38879

Att: Mississippi Master Gardener Awards Working Group