



**Colorado State University Extension/Pueblo County  
NATIVE PLANT MASTER APPLICATION**



Please PRINT to ensure our accuracy. **Applications are due to CSU Extension/Pueblo County by Tuesday, May 29th.** Email your application to: [sherie.caffey@colostate.edu](mailto:sherie.caffey@colostate.edu) or mail to 701 Court Street, Suite C, Pueblo, CO 81003. PLEASE INCLUDE PAYMENT WITH YOUR APPLICATION if you are taking the course with no volunteer commitment. Those applying for the Native Plant Master Volunteer option, you will receive confirmation including a total for fees due. Visit <http://pueblo.colostate.edu/> or call Sherie at 719-583-6566 for additional information.

Please PRINT to ensure you receive course acceptance materials.

Your Legal Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Your Mailing Address: \_\_\_\_\_  
Street City State Zip

E-mail address (required): \_\_\_\_\_ County of Residence: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Please check the program for which you are applying:

- Certified Native Plant Master Volunteer. Complete all sections. Fee - Reduced to \$55 per course for volunteering to educate others and report contacts.**

To become a *Certified Native Plant Master*, one must:

1. Pass a background check.
2. Be accepted into the Native Plant Master Program; pay course fee(s) by designated deadlines.
3. Satisfactorily complete three Native Plant Master courses in this or future years including passing certification exams.
4. Teach at least 20 people per year about Colorado plants for each course taken (60 people if 3 courses are taken).
5. Report on number of educational contacts made and volunteer hours by November 15 each year.

- Take Native Plant Master Course(s) with no volunteer commitment. Fee - \$65 per course. Complete Sections A and C only.**

To take *Native Plant Master Courses* one must:

1. Be accepted into one or more courses pending space availability.
2. Pay course fee(s) - cash or check only or use credit card through Eventbrite.com.
3. All those successfully completing 3 NPM Courses will receive a Colorado Flora Certificate.

**SECTION A:** (All Applicants)

This is a 9-hour course. To become a certified Native Plant Master, you must complete 3 different courses and pass the exams. The three courses are completed over multiple years. Native Plant Master volunteers must also meet the educational contact requirement of 20 contacts per course taken (i.e., 60 contacts if 3 courses are taken). If you are already certified, you may take courses when space is available.

Course Dates	Times	Location	Fee
<b>Course #1</b> Saturdays June 9, 16 and 23, 2018	10 a.m. – 1:00 p.m.	Cheyenne Mountain State Park, Colorado Springs	\$55 – volunteer \$65 – non-volunteer

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**SECTION B: (Native Plant Master Volunteer Applicants Only)**

Do you currently work or volunteer for an organization where you can share your knowledge of native plants?

Yes \_\_\_ No \_\_\_ (if no, please discuss volunteer opportunities with NPM course instructor)

Do you work or volunteer for an educational agency? Name of agency: \_\_\_\_\_

Your Title: \_\_\_\_\_ Employee \_\_\_ Volunteer \_\_\_

In your current job or volunteer role, how many people did you educate in public programs last year (contacts)? \_\_\_\_\_

Would you be interested in becoming a trainer to teach Native Plant Master courses in future years? Yes \_\_\_ No \_\_\_ Not sure \_\_\_

**SECTION C: (All applicants must sign below)**

**If accepted for one or more Native Plant Master courses, I agree to:**

- Pay all fees by the designated date.
- Adhere to all Native Plant Master Program guidelines.
- Carefully read the waivers below, and if I agree, sign to indicate my agreement with these waivers:

I, the undersigned participant, exercising my own free choice to participate voluntarily in Native Plant Master® courses, classes or volunteer activities (collectively the “Activities”), and promising to take due care during such participation, hereby acknowledge that I have been informed of the nature of the Activities and that I am aware of the hazards and risks which may be associated with my participation in the Activities, including the risks of bodily injury, death or damage to property which may occur from known or unknown causes. I understand, accept, and assume all such hazards and risks, and waive all claims against the State of Colorado, The Board of Governors of the Colorado State University System, Colorado State University, Colorado State University Extension, Pueblo County, and their directors, officers, agents, employees and volunteers. I understand that I am solely responsible for any costs arising out of any bodily injury or property damage that I may sustain through my participation in normal or unusual acts associated with the Activities, regardless of whose fault may be the cause of my injuries or damages, EVEN IF CAUSED BY CARELESSNESS OR NEGLIGENCE, so long as the conduct which caused the injuries or damages was not grossly negligent, or willful and wanton.

Further, I hereby indemnify and hold harmless The Board of Governors of the Colorado State University System, Colorado State University, Colorado State University Extension, Pueblo County and their members, officers, agents, employees, and any other persons or entities acting on their behalf, and the successors and assigns for any and all of the aforementioned persons and entities, against any and all claims, demands, and causes of action whatsoever, whether presently known or unknown, of any person who suffers any injury, disability, death or other harm, to person or property or both, as a result of my participation in and/or presence at Activities.

I have had sufficient time to review and seek explanation of the provisions contained above, have carefully read them, understand them fully, and agree to be bound by them. After careful deliberation, I voluntarily give my consent and agree to this Release From Responsibility, Assumption of Risk, and Waiver.

I grant permission to Colorado State University Extension, its employees or representatives, to take and use photographs/digital images, videotape, audio recording or quoted remarks, educational or other PowerPoint or presentation materials of me or prepared by me for use in promotional or educational materials. These materials might include printed or electronic publications, Web sites or other electronic communications. I further agree that my name and identity may be revealed in descriptive text or commentary in connection with the image(s).

I agree that the media may contact me to speak with me regarding my involvement in CSU Extension activities. I authorize the use of these materials indefinitely without compensation to me. All negatives, positives, prints, digital reproductions and video and audio recordings shall be the property of Colorado State University Extension.

\_\_\_\_\_  
Participant Signature \_\_\_\_\_  
Date

In order to help us best serve diverse audiences and meet reporting requirements, we ask that you provide the information below (*optional*). Responses are strictly confidential. Thank you.

<b>Gender</b>	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
<b>Race/Ethnicity</b>	<input type="checkbox"/> White, Non-Hispanic	<input type="checkbox"/> Black	<input type="checkbox"/> Hispanic Origin
	<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian	<input type="checkbox"/> Multi-Race