Cornell Cooperative Extension Tompkins County

Compost Education Program 615 Willow Ave, Ithaca 14850 Rotline 607-272-2292 x 124 acm1@cornell.edu www.ccetompkins.org/compost



MASTER COMPOSTER VOLUNTEER APPLICATION

Application Deadline: Monday, January 29, 2024

Complete the <u>online webform</u> or fill out this PDF, save, and email it to Adam Michaelides at <u>acm1@cornell.edu</u>. You may also print this PDF, fill it out and return it to the Compost Education Program, CCE-Tompkins, 615 Willow Avenue, Ithaca, NY 14850

If a response requires more space than is provided, please use the Additional Space for Application Responses section on the third page. Complete **all three pages** to be considered for the Program. Call the "Rotline" (607) 272-2292 or email Adam at acm1@cornell.edu with any questions. Thank you for your interest in the Master Composter Program.

	Name:	Day Phone:				
	Email:					
	Preferred Communication: email _	phonetext	Cell Phone	:		
	Mailing Address:	City	State	Zip		
	Date of Application:	Birth date if under 18:				
1.	Where did you learn about the opportunity to volunteer as a Master Composter?					
2.	a. Have you ever volunteered/worked for Cooperative Extension before: Yes No b. If yes, give dates, program position, County/State					
3.	List one or two volunteer, paid or educational experiences related to your application to become a Master Composter volunteer.					
	Organization / Employer P	Position/Related Ac	etivity	Dates		
4. For the volunteer, paid or educational experience(s) that you listed above, please expand a. Any <u>classes</u> in the areas of waste management, natural resources, soil science, et						
	b. Formal or informal <u>teaching expe</u>	eriences related to o	composting or	other subjects.		

3.	a. Do you compost at home now, or have you in the past? Yes No b. If 'yes', what do you compost? What composting system do you use (i.e., type of bin, if any)? How do you use the finished compost? Describe your gardening experience					
6.						
7.	What skills would you like to develop as a Master Composter?					
8.	Why do you wish to become a Master Composter?					
tra pa tra gra	obtain certification as a Master Composter, volunteers in training are required to attend all sining classes and complete a practical internship. After training, new Master Composters rticipate in Program-sponsored events and community outreach activities. Master Composter sinee selection is based in part on an applicant's ability to fulfill the requirements of the pro-am. For more specifics, see: http://ccetompkins.org/mc-job-description					
9.	a. Check (√) three of the following Master Composter training topics that most interest you. Compost 101/Basics Community Composting Beneficial Role in Soils Compost Systems (bins) Effective Teaching Compost Maturity & Testing Compost & Sustainability Basic Compost Science Compost Harvesting & Use Waste Reduction & Recycling Compost Biology/Ecology Other (describe below) b. Which one of these would be your first choice?					
10.	 a. Check (√) three of the following volunteer activities that most interest you. Plan and teach classes/workshops or give presentations to YOUTH groups Plan and teach classes/workshops or give presentations to ADULT groups General education (staff the compost education booth, help friends, neighbors and coworkers set up and manage compost, compost at festivals or other events) Assist with composting at schools or community sites, such as community gardens (build bins, establish compost systems, maintain sites, troubleshoot) Program leadership/development (coordinate events, plan MC training, social media) Update or develop program resources (write articles, create factsheets or posters) Other ways you hope to contribute (please describe in comments section below) 					
	b. Which one of these would be your first choice? c. Comments (optional):					

11.	a. Do you speak language(s) other than English? Yes No b. If 'yes', what language(s)? c. Fluently? Yes No					
	d. Comments (optional):					
7	If you are selected to train as a Master of a formation for two people, not related to We may contact these individuals or ask PLEASE LIST TWO PEOPLE WHO W	you, who have knowledge o them to complete a short refe	f your qualifications. rence questionnaire.			
	First and Last Name	Title, or Relationship to Yo	u			
(refe	rence #1)					
(refe	rence #2)					
12.	 12. a. Do you have an independent and reliable means of transportation to and from classes and volunteer activities? YesNo b. If 'no', please describe 					
13.	a. Do you require accommodations for a disability? Yes No b. If 'yes', please describe					
14.	4. a. Do you now have, or anticipate, any obligations that may prevent you from fulfilling the volunteer commitment to the Program by the end of the calendar year?YesNo b. If 'yes', please describe					
15.	5. The training deposit amount is \$60. It is returned upon completion of volunteer hours after training. Financial assistance is available for candidates in need. Would you like to speak to the Program Manager about receiving financial assistance? Yes No					
	General Availability (check all that apply) Weekdays Weekends Day After School Evening	17. Approximately how many hours per week do you anticipate volunteering?	18. What age group do you prefer to work with? Youth Adults			

*Note: individuals selected for Master Composter training will be required to complete the Long Term Volunteer Application which includes volunteer screening: http://ccetompkins.org/resources/ volunteer-application-long-term. More will be explained during the Master Composter interview.

> ADDITIONAL SPACE FOR APPLICATION RESPONSES AND ADDITIONAL COMMENTS (OPTIONAL)