

**RECORD OF MASTER GARDENER EVENT
ADVICE HOURS ONLY**

Master Gardeners Association of B.C.
C/o VanDusen Botanical Gardens
5251 Oak St., Vancouver, B.C., V6M 4H1

Office use only:	
questions attached	
answers for first year students attached	
Follow up required:	
re:	
results:	
done:	
<i>Pink sheet completed:</i>	

DATE _____

LOCATION (Name & Address) _____

PLEASE REPORT ONLY ONE EVENT AND NAMES OF ATTENDEES ON THIS FORM

- This form is to be returned by Clinic Coordinator within 1 week of clinic

- Please only send one copy. It can be dropped into the MG box at the VanDusen Admin Office

Clinic Coordinator	MG 1 st yr / 2 nd yr			How was the weather?
	MG 1 st yr / 2 nd yr			
	MG 1 st yr / 2 nd yr			
	MG 1 st yr / 2 nd yr			

Were there enough Master Gardeners present? Yes/No _____ How many more required? _____

How many did you serve? Number if possible _____

Was the host organized, friendly and cooperative? Yes/No _____ Put remarks/concerns in comments

Did the event proceed as scheduled? Yes _____ No _____ Put remarks/concerns in comments

If no, please explain: include - names of "no shows" and / or extra MGs'

- Changes made to scheduled time shown on Master List

Additional Comments - if more space needed please use back

NB Each Master Gardener is responsible for writing down the questions they are asked and giving them to the Clinic Coordinator to send in with this sheet. Current year's students are responsible for their own questions and answers (each student on a separate sheet). Include name of location, date and your name. Thank you.