



Propose a New Volunteer Project

Use this form to request approval of an entirely new project that is different from any currently approved projects. Keep in mind that submission does not guarantee approval.

When requesting approval for a new volunteer project consideration should be given to all factors contained in Article VI of the Chapter Management and Operations Protocols Manual .
(<https://txmn.tamu.edu/> Click on "For Chapters" "Chapter Documents" Scroll down to find the Manual)

Name of the proposed new project:

Critical Criteria

Volunteer work must be of a type that furthers the TMN mission statement. "To provide education and outreach and service dedicated to the beneficial management of natural resources and natural areas within our communities." This mission includes educating the public on natural resources, as well as managing, maintaining, and improving the environment for the benefit of wildlife and the public.

How does this project relate to the TMN mission?

Volunteer work must fall under one of the Texas Master Naturalist Service Project Opportunity Categories as described in **Article VI of the Chapter Management and Operations Protocols Manual**. Which service project category does this proposal fall under and how does it fit?

Project Description:

Will the work be done on private property?
Yes No

If yes, has written approval been gained for access to the private property?
Yes No

Volunteer Work that results in a profit to another organization cannot be approved. Is the sponsoring organization a non-profit? If yes, please provide organization information below.

Yes No



**Propose a New Volunteer Project
(Continued)**

Please describe any environmental impact. How many acres, how many trail miles etc.

Date the project will begin if known:
Date the project will end if any:
How many volunteers will be needed?:

Is there any special training required? If yes, please describe below. Where/how will the training take place, who will provide the training?
Yes No

Is there an AT component to this project?
Yes No

If so, where will the training take place, who will provide the training and will this require a new Advance Training opportunity? (If a new AT opportunity is required, please submit an Advance Training request with this New Project Request)

Does this project involve direct interaction with children? If it does, the project manager/coordinator must ensure that Master Naturalist's involved have completed a background check.
Yes No

Other Comments:



Project Contact Information

Who will be the project coordinator? (In most cases this should be the person requesting the project.)

Project coordinator's email:

Project coordinator's phone number:

Who will sponsor the project? Name of the organization or site owner.

Name of the contact person from the sponsoring organization including phone number and email.

Website of sponsoring organization:

Project location Must be within the counties covered by our chapter. If not within our service area special permission must be received from the chapter where the service will be performed.

Street Address:

Address Line 2:

City and County:

State & Zip Code:

Submit for approval to: **Current Chapter President**

Approved

Denied

Reason for Denial