

**VCE-MG of the Northern Neck Recertification Training Authorization Form**

Name \_\_\_\_\_

**Proposed Training Class/Lecture/Activity (include dates, hours of training and personnel providing the training)**

**Check the area within the VCE Plan of Work Goals and Objectives that best applies to this training activity.**

- Obj. 1: Protecting the environment by educating about sustainable landscape management**  
(e.g. soil, plants, pest management, wildlife habitat, fertilizers, water quality, waste management, erosion control)
- Obj. 2: Using horticulture and landscaping to change attitudes and behavior of youth**  
(e.g. fill SOL requirements, leadership and citizenship through horticulture, Junior MG)
- Obj. 3: Marketing the value of the landscape**  
(e.g. proper design, installation and maintenance of sustainable landscapes for economic benefit to the individual & community)
- Obj. 4: Home food production and human nutrition**  
(e.g. knowledge in growing food, organizing community gardens and/or food bank contributions)
- Obj. 5: Using horticulture to improve human health, well-being and quality of life**  
(e.g. personal, community and work place health education; horticulture therapy)

**Submitted by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
ANR Agent or Horticultural Program Assistant

**Approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
MG Coordinator

