



Virginia Master Naturalist Program Rivanna Chapter Project Proposal Form

Project proposals should be completed by partner organizations or chapter members and submitted to the Rivanna Chapter's Board of Directors for review. Projects will be evaluated for relevance to program mission and objectives. Projects and activities implemented without approval are not considered Master Naturalist activities, do not count towards required service hours, and do not carry the liability shield.

Project Name: *(For approval and recording purposes)*

Submitted By:

Phone or Email Contact:

Project Purpose and Value: *(How will this project contribute to natural resource management, conservation, or education?)*

Project Type: *(Is this project education/outreach, citizen science/monitoring, stewardship, or administrative?)*

Project Description: *(Describe what the project involves. What will participants actually do?)*

Project Location: *(Where will this project take place?)*

Time Frame: *(What is the time frame for this project? Be as specific as possible – what time does the volunteer need to be there and how late are they expected to stay? If it is seasonal, what are the approximate dates or appropriate weather conditions? Is this an on-going project or does it have a fixed end date? About how many hours can a volunteer expect to put into this project?)*



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Partner Contact: *(If a partner is involved, who at that organization is the contact for this project?)*

Name: _____ **Organization:** _____

Phone Number: _____ **Email:** _____

Project Chair: *(Who from the chapter is the contact person and organizer for this project?)*

What prior experience or expertise is required or preferred?

What training will be provided and by whom?

Resources Provided: *(What equipment or other resources will be provided for the volunteers(s)?)*

Resources Needed: *(What will the volunteer(s) or chapter need to provide and how will these resources be acquired?)*

Safety Hazards and Protocols: *(What hazards might the volunteers encounter and what safety protocols should be followed?)*

Are minors involved? *(If yes, then all volunteers must be trained in working with youth and the Above Suspicion policy.)* **YES** **NO**

How will the project be evaluated during implementation and after completion?

How will the Virginia Master Naturalist, Rivanna Chapter be recognized?

How will volunteers benefit from participation in the project?

For Chapter Board of Directors Only: Project Approved? YES NO Date: