Union Miles Agriculture &
Green Landscaping (UMAG) 4.0
Application

Name _____________________________________________________________

Business Name_______________________________________________________

Address______________________________________________________________

City __________________________ State _______ Zip __________

Home Phone _______________ Business Phone___________________________

Cell Phone: __________________ Fax: ________________________________

Website: __________________________________________________________

Check if you have a social media profile:

☐ Facebook  ☐ Instagram  ☐ Twitter  ☐ LinkedIn  Other____________________

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How did you find out about the UMAG program ________________________________

____________________________________________________________________________

Referred by ____________________________

Have you participated in the Ward 2 Grass Cutting Program: ☐ YES  ☐ NO

If you marked yes which neighborhood? ☐ Union Miles  ☐ Mt. Pleasant

Neighborhood not listed____________________________________________________

What was the last year you participated in the program _________________________

**************************************************************************

Emergency Contact information: ____________________________________________

Name  Telephone #

Relationship______________________________________________________________

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What skills would you like to gain from completing the UMAG Training? _________

____________________________________________________________________________

____________________________________________________________________________
Please indicate the number of years in landscaping experience you have _______.

Do you own a landscaping business? □ YES □ NO

Are you interested in owning a landscaping business? □ YES □ NO

List of landscaping equipment you/your company owns________________________________________

_____________________________________________________________________________________

If you are not a landscaper, please describe your interest in the UMAG program ____________________

_____________________________________________________________________________________

Choose your class schedule.

Note: Certificate does not mean Certification.

I am applying for the Fall/Winter 2016 Training

Schedule: 10-week course from November 7th thru March 4th 2016

Landscaping Courses:

Mandatory - 5 weeks □ Last Day Nov. 8th

Landscaping Course (5 weeks) □ Last Day Nov. 8th

Are you seeking the a scholarship □ YES □ NO

Classes are held every Saturday 11:00am – 4:00pm.

Class projects will be completed on dates TBD

Course Schedule:

- **Orientation: Monday November 7, 2016 4pm – 5pm**
  - **Class 1 and 2:** Week 1 - Roots of Success
    Module 1 - Fundamentals of Environmental Literacy
    Dates: 11/12 - Instructor: Philena Seldon
    Last day for withdrawal from Roots of Success refund will be based on percentage of completion, student will receive credit for all completed work and must complete course within one-year.
  - **Class 3 and 4:** Week 2 - Roots of Success
    Module 2 - Water
    Dates11/19 - Instructor: Philena Seldon
  - **Class 5 and 6:** Week 3 - Roots of Success
    Module 3 - Health, Food & Agriculture
    Dates: 12/3 - TBD - Instructors: Philena Seldon
  - **Class 7 and 8:** Week 4 - Roots of Success
    Module 4 - Health, Food & Agriculture; Community Organizing & Leadership
    Dates: 12/10 - TBD - Instructor: Philena Seldon
  - **Class 9 and 10:** Week 5 - Roots of Success
    Module 5 - Community Organizing & Leadership
    Dates: 12/17 - Instructor: Philena Seldon
- **Class 11 and 12**: Week 6 - Landscape for Life
  - 1/7: Lesson 1, Sustainability in Home Gardens
  - Lesson 2, The Role of Soil in Sustainable Gardens
  
  *Instructor: Philena Seldon – Hands On Experience – Location TBD (guest instructor)*

- **Class 13 and 14**: Week 7 - Landscape for Life
  - 1/14: Lesson 3, Successful Soil Practices
  - Lesson 4, The Role of Water in Sustainable Gardens
  
  *Instructor: Philena Seldon
  Last day for withdrawal from Landscape for Life refund will be based on percentage of completion, student will receive credit for all completed work and must complete course within one-year.

  – Hands On Experience – Location TBD (guest instructor)*

- **Class 15 and 16**: Week 8 - Landscape for Life
  - 1/21: Lesson 5, Successful Water Practices
  - Lesson 6, The Role of Plants in Sustainable Gardens
  
  *Instructor: Philena Seldon – Hands On Experience – Location TBD (guest instructor)*

- **Class 17 and 18**: Week 9 - Landscape for Life
  - 1/28: Lesson 7, Successful Plant Practices
  - Lesson 8, Selecting Materials for Sustainability
  
  *Instructor: Philena Seldon – Hands On Experience – Location TBD (guest instructor)*

- **Class 19 and 20**: Week 10 - Landscape for Life
  - 2/4: Lesson 9, Successful Materials Practice
  - Lesson 10, Exploring Sustainable Garden Design Strategies
  
  *Instructor: Philena Seldon
  – Hands On Experience – Location TBD (guest instructor)*

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<th>Prerequisite – Environmental Literacy Courses</th>
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<td><strong>Week 1</strong>: Fundamentals of Environmental Literacy</td>
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<td><strong>Week 2</strong>: Water</td>
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<td><strong>Week 3</strong>: Health, Food &amp; Agriculture</td>
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<td><strong>Week 4</strong>: Health, Food &amp; Agriculture, Community Organizing &amp; Leadership</td>
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<tr>
<td><strong>Week 5</strong>: Community Organizing &amp; Leadership</td>
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**Electives: (Optional)**

Will be discussed at orientation

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1. I understand that the curriculum involves up to field trips, seminars, and workshops that I agree to attend:  
   □ YES  □ NO  ________ Initial

2. I am able to participate in the outdoor hands-on class projects that may require lifting over 20 lbs.  
   □ YES  □ NO  ________ Initial

**Payment Information:**
I agree to pay the non-refundable application fee of $5.00 and $50.00 restocking fee (money order or check is the only acceptable payment). NO Cash payments, NO EXCEPTIONS. Please submit your application with your application fee of $5.00 by, May 23, 2016. Remit to: Union Miles Development Corporation. Subject line: UMAG

I have enclosed my full payment for the following:
$150.00 10 week training

I am signing up for the Fall 2016 payment plan □ YES □ NO

$150 Payment Plan
I understand there is the $5.00 course fee and a $55.00 restocking fee will be deducted should I withdraw from the UMAG course. ______________ Initial.

Payment Plan:

First payment, $25.00, is due June 6th before Noon.
Your application fee will be deducted from your total cost.

10 Week Training Payment Plan  $150.00
Monday, June 20th $25.00
Monday, July 5th  $25.00
Monday, July 18th $25.00
Monday August 1st  $25.00
Monday, August 15th  $25.00

Graduation Certificates will not be released until payment is made in full. ______________ Initial
If UMAG student successfully completes the full curriculum but has outstanding payments, the student is not considered a UMAG member or graduate until payments are made in full before December 3, 2016.

Union Miles Office
Paid in full □ YES □ NO
Date: ________________________________
Initial ________________________________ Final check no.__________

Scholarships are limited:

I am applying for a scholarship □ YES □ NO
I am applying for a □ Full Scholarship □ Partial Scholarship

I understand the scholarship application is due Monday, May 23, 2016 ____________ Initial

Please submit a 250- 500 word essay using the scholarship application.

Please mark below: Your Age range: □ 18-24 □ 26-34 □ 35-43
□ 44-49 □ 50-55 □ 56-64 □ 65 and older*
If you are under 18, you will need a written and verbal referral from your school or a youth organization, as well as written permission from your guardian. The training is designed for adults; however youth are welcomed to participate. Classes are available for youth ages 16 - 24.

**Discipline Information**

Do you have previous experience in landscaping, environmental services, field work, or gardening?  
☐ YES  ☐ NO

Are you a team player?  
☐ YES  ☐ NO

If you answered yes to either question, please elaborate on your level of experience, certifications, and/or education. Please attach your response to the end of the application.

UMAG is a training program designed to provide residents/citizens with a second chance in spite of most judicial records. The UMAG training program is a ZERO TOLERANCE program. Anyone found to violate, disrespect, or injure participants (UMDC staff, instructors or students) in the UMAG training program will be dismissed without refund of any payments and scholarship revoked as well as face criminal charges if necessary.

Please initial that you understand ___________ **Initial**

Your signature below indicates that the information you have supplied in this application is accurate and true to best of your knowledge; and that you agree to follow all of the rules and guidelines of the UMAG program upon registration approval for the courses. _____ **Initial**

Signature of Applicant _______________________________ Date____________

9250 Miles Park Avenue, Cleveland, Ohio 44105

Classes will go from 11:00am to 4:00pm
Start Date: Nov. 12th
Nov. 19th
*Dec. 3rd (Sub instructor)
*Dec. 10th (Sub Instructor)
Dec 17th
Jan. 7th
14th
21st
28th
Feb. 4th
18th
25th

Graduation and Job Fair will be on March 4th