



School/Community Service Project Application

Student Information: *please write legibly*

Date _____ Name _____ Age _____

Address _____ City/State/Zip _____

Home Phone _____ Cell Phone _____ Email _____

Parent/Guardian email (if different from above) _____

School Information:

Name of School _____

City/State _____ Current School Year _____

Teacher or other contact: _____

Phone: _____ Email Address _____

Project Information: *please use a separate piece of paper to complete the questions below*

- 1) What are the school requirements for this service project? Please include the number of hours and deadline for completion.
- 2) Why would you like to help dogs and/or CCAS as part of your project?
- 3) What do you hope to get out of your partnership with CCAS?

If you are younger than 18 years old, please have your parent or guardian sign below:

Signature of Parent/Guardian _____

Print name of Parent/ Guardian _____

Please fill out application and return to:

humaneeducation@cuyahogacounty.us

or snail mail: Cuyahoga County Animal Shelter
9500 Sweet Valley Dr.
Valley View, OH 44125
Attn: Humane Education Team