## **Armorel High School**

## Community Service Learning Community Partner Application for Local and State Board Approval

## **School District Information**

- Name of the School District Initiating this application: Armorel High School
- Name of the district/school licensed faculty supervisor(s) with whom non-profit/community organizations will be working: Melissa Booker, Counselor, Teresa Lawrence, Principal, and Certified Faculty

## Community Partner Information

- Name of non-profit/ community organization: Blytheville Humane Society
- Name of Director/ Contact Person:
- Address: 2530 Arizona Street Blytheville, Arkansas
- Phone Number: 870-838-5512
- Email Address:
- Hours of operation: 1:00-5:00 Monday -Friday
- What is the mission of the non-profit/community organization? To provide shelter for abandoned and abused animals as well as help to find forever homes for those in our care.
- What service(s) does the non-profit/community organization provide? Volunteers who provide medical services and upkeep of the animals and the shelter.
- Please <u>describe</u> the volunteer activities students will participate in at the non-profit/community organization and <u>how</u> those activities may connect to curriculum learning goals. The Act 648 implementation guide contains a breakdown of a few subject areas and goals. Students will volunteer to help restock supplies, give care and play with the animals, clean cages, run a donation drive, help make copies, and other office duties. Promotes social awareness, civic engagement, and cultural sensitivity, provides real- world applications, promotes effective communication skills and work ethic.
- What are the non-profit/community organization procedures and policies to ensure the safety of student volunteers? All students will be chaperoned by certified faculty while at the facility.
- List any special considerations of the non-profit/community organization. Confidentiality of those receiving goods and services.

Local School Board approval of this site as a district partner

| 12/9/22/9 |
| Signature of School board provident | Date of meeting at which site was approved.

Return completed application and this form to