

Santa Clarita Valley SELPA

**COMMUNITY ADVISORY COMMITTEE
FOR SPECIAL EDUCATION**



MEMBERSHIP APPLICATION FORM

Name(s):	Home Phone:
	Work Phone:
Street Address/City:	Mobile Phone:
	Email:
School District of Residence:	
Do you currently have children in district schools? Yes No	Are you a staff member? Yes No
Do any of your children have special needs? Yes No	If yes, please describe your role:
Please list schools:	
Briefly explain the reasons for your interest in serving on the committee (please attach a separate sheet if additional space is needed):	
Please add any other comments regarding the strengths that you would bring to the committee:	
Participation with other school related organizations and/or groups?	
How did you hear about the CAC?	

As a CAC member, I will attend meetings and represent the special needs students of the Santa Clarita Valley.

Signature

Date

Please submit application to your Local School District, Special Education Department or the Santa Clarita Valley SELPA Office at:
24930 Avenue Stanford, Santa Clarita, CA 91355
~ or bring to a CAC meeting!