



Arizona State Board of Education

1535 W. Jefferson St.
Phoenix, Arizona 85007

(602) 542-5446

<http://www.azed.gov/specialeducation/seap/>

SEAPInbox@azed.gov

APPLICATION FOR CONSIDERATION FOR APPOINTMENT TO A COMMITTEE, AD HOC ADVISORY COMMITTEE, OR TASK FORCE

Please submit the following application AND a resume that includes employment history, educational background, and civic involvement to SEAPInbox@azed.gov.

Name: _____

Home Address: _____

City/State/Zip Code: _____

Office Address: _____

City/State/Zip Code: _____

Preferred Phone: _____ Preferred E-mail: _____

I am interested in serving on the:

Special Education Advisory Panel

IDEA 2004 requires specific panel membership representation on the Special Education Advisory Panel (SEAP). To ensure that membership requirements are met, please check the category or categories that apply:

- A parent of a child with a disability who is eligible under IDEA 2004 (ages birth through 2 6)
- An individual with a disability
- A teacher
- An administrator of programs for children with disabilities
- A State and local education official, including officials who carry out activities under subtitle B of title VII of the McKinney-Vento Homeless Assistance Act
- A representative of an institution of higher education that prepares special education and related service personnel
- A representative of other State agencies involved in the financing or delivery of related services to children with disabilities
- A representative of a public charter school
- A representative of a vocational, community, or business organization concerned with the provision of transition services to children with disabilities
- A representative from a State child welfare agency responsible for foster care
- A representative from a State juvenile corrections agency
- A representative of a non-profit private school
- A representative from a State adult corrections agency

Previous involvement with committees of the State Board of Education or Department of Education: (Please include the name of the committee, dates served, and position held, if applicable)

Briefly explain why you are interested in and what best qualifies you for this position:

- I have attached a resume that includes employment history, educational background, and civic involvement**

Voluntary Information:

This information is used solely for the purposes of ensuring committees are comprised of members reflecting the entire state of Arizona and its community.

Ethnicity:

- African American
- Asian/Pacific Islander
- Caucasian
- Latino
- Native American
- Other

Gender:

- Male
- Female

Signature

Date

----- Office Use -----

Nominated By: _____

Date Considered for Appointment: _____

Initial Appointed: [] Yes [] No Reappointment: [] Yes [] No

Term Effective: _____ Term Expires: _____

Date Notified: _____