



COMMUNITY ADVISORY COMMITTEE MEMBERSHIP STUDENT APPLICATION

DIRECTIONS: Please complete each section of this application if you are interested in becoming a member of the Los Angeles Unified School District’s (LAUSD) Community Advisory Committee (CAC). All information listed here is confidential. All sections of the CAC application must be completed before submission.

SECTION 1

I am a: New applicant Returning applicant indicate year(s) of service _____

First and Last Name: _____

Address: _____ City: _____ Zip: _____

Telephone: (home) _____ (cell) _____ (work) _____

Email address: _____

Pupil with a disability *High School student enrolled in public or private schools, including non-public schools, and charter schools participating in LAUSD’s Special Education Local Plan Area*

Parent please complete this section for your student *Parent/legal guardian of a child with exceptional needs enrolled in LAUSD’s Special Education Local Plan Area. If you are applying under this category, please provide the following information:*

<i>Name of Student’s School:</i>	
<i>Student’s Birthdate:</i>	<i>Student Identification Number (Contact school or see report card for this number)</i>



Office of Parent and Community Services
Division of Special Education
Community Advisory Committee



SECTION 2

Please answer the following questions to the best of your ability.

- 1. Briefly describe your knowledge about Special Education programs and services. Please identify specific programs and/or services that you have had experience with.

- 2. What impact would you like to have on the CAC? Please include your personal purpose and vision.

- 3. Please list any affiliations, councils and/or committees of which you are currently a member (e.g. SSC, ELAC, school leadership or governance, PTA/PTO, faith-based organization, homeowner’s association, etc.)



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SECTION 3

Commitment Statement: I commit to be an active participant on the CAC. In doing so, I will need to collaborate with other members of the CAC and Office of Parent and Community Services’ staff to provide input to LAUSD on the Special Education Local Plan Area’s Local Plan. I will follow all state and federal laws, LAUSD policies and procedures, the CAC Operating Norms and Code of Conduct, and the CAC bylaws.

CAC meet monthly on the third Wednesday July through June for approximately 3 hours.

Meets are held 10:00am-1:00pm. Members may be asked to attend additional meetings as needed.

Learn more about the CAC and how to apply during an informational webinar to be held on **Monday, November 8, 2021, from 5:00-6:00pm.**

Webinar link: bit.ly/3uYF68E Please copy and paste into the internet search engine bar.
Passcode: 2021 | **Telephone:** 1 669 900 6833

I understand these basic responsibilities of a committee member. I hereby submit my application for membership to the CAC and verify that the information provided above is true and correct.

STUDENT SIGNATURE: _____

DATE: _____

PARENT SIGNATURE: _____

DATE: _____

Applications must be submitted by Friday November 17, 2021.

Please return completed application to:

**Lisa Porter via email to lisa.porter@lausd.net
Office of Parent and Community Services**

If you need assistance to complete this application, email families@lausd.net or call 213-481-3350 and leave a voice message.

PCS Office Staff Only

Date completed application was received: _____ PCS staff member initials: _____

Date of BOE Approval: _____ Previous 2-year term: _____