



Pasadena Unified School District
Division of Special Education
Community Advisory Committee (CAC)

Please return to: Special Education Department, 351 S. Hudson Ave. Pasadena, CA 91109

The Mission of the Pasadena Unified School District (PUSD) Community Advisory Committee for Special Education referred to as the CAC; which is mandated by the State of California Department of Education and Education Code Section; 56190-56194, Special Education Programs, Article VII, is to help ensure that the Pasadena Unified School District delivers quality special education services, in compliance with federal and state laws, to all children with disabilities.

2018-2019 CAC MEMBERSHIP APPLICATION

(All information is confidential)

[ ] New Member

[ ] Renewal
Year appointed? \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (work) \_\_\_\_\_

Email address: \_\_\_\_\_

Special Needs/Accommodations needed: No [ ] Yes [ ] (if yes please explain)

Please indicate the appropriate category for your application:

\_\_\_ Parent of Special Education Students (Parent/legal guardian or conservator of a child with a disability enrolled in PUSD. If you are applying as a parent please complete the parent application portion of this form.)

\_\_\_ Parent of General Education Students (Parent/legal guardian enrolled in public or private schools, Charter Schools participating in the local plan.)

Name of School \_\_\_\_\_

\_\_\_ Pupil with Disability (Enrolled in public or private schools, Charter Schools participating in the local plan)

Name of School \_\_\_\_\_

Completion of application does not ensure membership. Membership is contingent upon geographic and categories representatives of the demographics in the District as provided in Education Code section 56191, 56192. Applicants are approved by and are pending on Board of Education appointment.

\_\_\_ **Adult with Disability**

\_\_\_ **Special Education Teacher** selected by UTP (*Specify school/position/program*)

Name of School \_\_\_\_\_ Position \_\_\_\_\_ Program \_\_\_\_\_

\_\_\_ **General Education Teacher** selected by UTP (*Specify school/grade*)

Name of School \_\_\_\_\_ Grade \_\_\_\_\_

\_\_\_ **APSA** selected by APSA (*Specify position/location/division/department*)

Position \_\_\_\_\_ Location \_\_\_\_\_ Div. \_\_\_\_\_ Dept. \_\_\_\_\_

\_\_\_ **Community Agency Representative** (*Specify name of agency/organization/public or private*)

Name of agency \_\_\_\_\_  Public Agency  Private Agency

\_\_\_ **Individual** (*Concerned with the needs of individuals with exceptional needs enrolled in PUSD schools*)

**Please answer the following questions:**

The CAC is an **advisory committee**. Members are required to be actively involved and participate on Division of Special Education committees.

Why do you want to join the CAC?

---

---

---

How do you believe you can contribute to the CAC?

---

---

---

Do you have any other interests related to CAC?

Yes (Please list below)

No

Please list all Affiliations, Councils, Committees, which you are currently attending or are a member of:

**Commitment Statement:**

In accordance with the requirements, the Community Advisory Committee is called to advise the Board of Education about issues related to special education. The committee fulfills duties in accordance with the State Education Code, Pasadena Unified District Policies and Procedures. Each member is required to participate on committees to support other activities on behalf of the CAC.

It is the intent of the CAC to strive to maintain a voting membership of "Parents of Students with Disabilities" representatives reflective of the diversity and geographic location in the **PUSD Special Education Local Plan Area (SELPA)**. Furthermore, the CAC strives to ensure that the committee is comprised of a representation from other groups.

I commit to be an active participant on the committee. In doing so, I will work to improve outcomes for all students by supporting an educational program based upon students' needs, equal opportunities and free appropriate public education in the least restrictive environment. I will collaboratively, follow the State Education Code, Pasadena Unified District Policies, and Procedures, the Operating Norms and Code of Conduct.

I hereby submit my application for membership to the Community Advisory Committee, and verify that this information is correct.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Please return to: Special Education Department  
351 S. Hudson Ave. Room 227 Pasadena, CA 91109  
Phone #626.396.3600 x:88600 Fax # 626.795.5309  
Email: [allarid.susan@pusd.us](mailto:allarid.susan@pusd.us)**

Office use only

\_\_\_\_\_  
Date submitted

\_\_\_\_\_  
Date submitted to Board of Education

\_\_\_\_\_  
Date approved

Completion of application does not ensure membership. Membership is contingent upon geographic and categories representatives of the demographics in the District as provided in Education Code section 56191, 56192. Applicants are approved by and are pending on Board of Education appointment.