Saint Paul Public Schools
Special Education Advisory Council (SEAC)
Membership Application

The purpose of the Saint Paul Public Schools' SEAC is to collaborate with the District's Office of Specialized Services to:

- **Address the unique needs of diverse learners** so they can meet their maximum potential.
- **Promote respect and inclusion** for all students and families.
- **Build strong relationships** between families, schools, community partners, and district decision makers to influence decisions and policy making.
- **Empower and support parents** to effectively advocate for children.

Name: _____ **Date:** _____

Address: _____ **City:** _____

State: _____ **Zip:** _____ **Email:** _____

Primary Phone: _____ **Secondary Phone:** _____

Optional: Your student's race/ethnicity: _____

SPPS uses this information to help ensure diversity and balance on our committees and councils

What racial, cultural, linguistic, class, gender, sexual orientation, religious, and other differences of experience do you have that you are able to bring to SEAC to improve the experiences and outcomes of students with disabilities and their families in SPPS?

_____

_____

What topics would you like SEAC to address?_____

_____

_____

Parent/Guardian: I am the parent/guardian of a student with a disability enrolled in Saint Paul Public Schools

___Yes ___No Area of disability: _____ School or Program:_____

Staff Member: I am a SPPS Staff member

____ Yes ____ No Title: _____ School/Program/Site :_____

Community Member: I am a community member

_____ Yes ____ No Agency or Organization: _____