



Grant Parish School Board
P O Box 208 512 Main Street
Colfax, LA 71417
(318) 627 - 3274

Local Special Education Advisory Council Application

APPLICANT INFORMATION

Full Name:	Last	First	Middle Initial
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Street Address:	
City, State ZIP	

Cell Phone:	
Home Phone:	
Email Address:	

- Position Applied For: (check one)**
- Parent
 - High School Student
 - Representative of an entity serving students with disabilities
 - Other Special Education stakeholder
 - Teacher, Principal, or Paraprofessional

Do you have a child attending Grant Parish Schools? Yes (continue) No (move to next section)

Does your child receive Special Education services? Yes No

What school does your child attend? CES GTHS GJH GHS MHS PES SGES VES

What grade is your child in? PK K 1 2 3 4 5 6 7 8 9 10 11 12

What is your child's exceptionality? _____

Are you an employee of Grant Parish Schools? Yes (continue) No (move to next section)

Which school? CES GTHS GJH GHS MHS PES SGES VES

List your position: _____

EXPERIENCE AND PROFESSIONAL BACKGROUND

Educational Background:	
Professional background & work experience:	
Prior school district involvement:	
Prior civic activities:	

<p>Why are you interested in serving on this council?</p>	
<p>What strengths would you bring to this council?</p>	

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

I understand that completing this application does not guarantee appointment to the council. Furthermore, I understand that participation is on a volunteer basis as there is no compensation provided to Special Education Advisory Council members. Additionally, I understand that the purpose of the Special Education Advisory Council is to be a resource for the local superintendent and school board. The Grant Parish Special Education Advisory Council has no authority to direct school district personnel, operations, policies, or budgeting. There is no requirement that the advice or feedback of the Grant Parish Special Education Advisory Council be adopted or implemented by the Grant Parish School Board or local superintendent.

Signature: _____ Date: _____