

**Northland Learning Center Special Education Advisory Council (NLC SEAC)**

**Application for Membership**

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

Address: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Please indicate which membership category you represent:

**Parent/Guardian Member**

Child's School: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Disability Category: \_\_\_\_\_

**School District Staff Member**

School: \_\_\_\_\_ Job Title: \_\_\_\_\_

**Community Member**

Organization/Agency: \_\_\_\_\_ Your Role: \_\_\_\_\_

**Background and Qualifications**

1. Why are you interested in serving on the SEAC?
2. What system-wide special education concerns would you like to see the SEAC address?
3. Have you read the NLC SEAC by-laws and participation guidelines?
4. If you were invited to submit this application, please indicate who referred you:

Applications are accepted on an ongoing basis to fill openings as needed. If you have questions, contact Katie Heimdal, Director of Special Education, for the Northland Learning Center at 218-471-9201.

**Please return this completed form via mail, email or fax to:**

Katie Heimdal, Director of Special Education  
Northland Learning Center  
1201 S. 13th Ave.  
Virginia, MN 55792

Email: [kheimdal@northlandsped.org](mailto:kheimdal@northlandsped.org) Fax: 218-741-5384