

**Individuals with Disabilities Education Act (IDEA)
State Advisory Panel Nomination Form
2017-2018 School Year
(Please answer all questions below)**

NOMINEE INFORMATION

1. Nominee Name: _____ Female
Male
2. Race/Ethnicity: _____
3. Address: _____
City: _____ State: _____ Zip: _____
4. Telephone: _____ Fax: _____
5. Email: _____ Occupation: _____
6. Current Employer: _____
7. Do you represent an organization: Yes No
If so, which organization: _____
8. Current Panel member seeking re-appointment: Yes No
9. Number of terms served on IDEA State Advisory Panel (each term 3 years): _____
10. Total number of years served on IDEA State Advisory Panel: _____

Please check place of residence:

- Northwest
 Northeast
 Southwest
 Southeast
 Central (Albuquerque, Rio Rancho, Bernalillo, Los Lunas, Santa Fe)

The New Mexico Public Education Department (PED) established and maintains an advisory panel for the purpose of providing policy guidance with respect to special education and related services for children with disabilities in the State. (34 CFR § 300.167).

Please check one (1) group of constituents you have chosen to represent from the boxes located on the let of chart:

<input type="checkbox"/>	Parents of child(ren) with disabilities (ages birth through 26)	Age(s) of child(ren):
<input type="checkbox"/>	Individuals with disabilities and I will represent that constituency	
<input type="checkbox"/>	Teachers (Regular Education or Special Education) (Circle one of the above)	District:
<input type="checkbox"/>	Representatives of institutions of higher education that prepare special education and related services personnel	List Institution:
<input type="checkbox"/>	State and local education officials, including officials who carry out activities under subtitle B of title VII of the McKinney-Vento Homeless Assistance Act, (42 U.S.C. 11431 <i>et seq.</i>)	
<input type="checkbox"/>	Administrators of programs for children with disabilities	List Program:
<input type="checkbox"/>	Representatives of other State agencies involved in the financing or delivery of related services to children with disabilities	List Agency:
<input type="checkbox"/>	Representatives of private schools and public charter schools	List School:
<input type="checkbox"/>	Representative of a vocational, community, or business organization concerned with the provision of transition services to children with disabilities	List Agency:
<input type="checkbox"/>	A representative from the State child welfare agency responsible for foster care	List Agency:
<input type="checkbox"/>	Representatives from the State juvenile and adult corrections agencies(Circle one of the above)	List Agency:

The State Advisory Panel Members must attend meetings four times per year. Each meeting is at least two days in length. Meetings are held in various locations throughout the state. Are you able to attend two day meetings and travel four times a year to different locations in the state?

Yes No

How will you or the person being nominated help to advise the New Mexico IDEA State Advisory Panel on issues effecting students with disabilities and their families?

Please include your resume or the resume of the person being nominated.

Please return the original copy of this nomination form, **signed and dated**, by August 31, 2017. Include resume and mail to:

New Mexico Public Education Department
Special Education Bureau
Attention: Sandra Riggs
120 S. Federal Place, Room 203
Santa Fe, NM 87501

Applicant Signature or person nominating applicant

Date

Print Name