



COMMUNITY ADVISORY COMMITTEE (CAC)

Election Meeting

Wednesday, November 15, 2017



Review of Agenda

- Welcome
- Pledge of Allegiance
- Public Comment
- Greetings from the Division of Special Education
- Roll Call/Establish Quorum
- Orientation for CAC Members and Alternates
- Election of CAC Officers
- Division of Special Education Updates
- Announcements from members and PCS staff
- Agenda Recommendations
- Adjournment



Norms

1. Put kids first
2. Respect the opinions of others.
3. Follow directions given before speaking.
4. Wait to be recognized before speaking.
5. No campaigning once the Orientation begins.
6. No texting or talking during the election.
7. Follow all election guidelines.



Today's Outcomes

- Review the purpose of the Community Advisory Committee and the important role it has in the District
- Review the expectations for CAC Representatives and Alternates
- Election of CAC Officers
- Receive Updates from Division of Special Education



REPORT FROM OFFICE OF PARENT AND COMMUNITY SERVICES:

Parent Putting Kids First



Public Comment

- First five (5) speakers will speak for two (2) minutes



Community Advisory Committee Purpose

The Community Advisory Committee (CAC) for Special Education advises the Board of Education, SELPA Director and the Superintendent's Cabinet on the annual priorities addressed in the SELPA and advocates for effective Special Education programs and services

Community Advisory Committee Composition

California Education Code 56192

The community advisory committee shall be composed of parents of individuals with exceptional needs enrolled in public or private schools, parents of other pupils enrolled in school, pupils and adults with disabilities, regular education teachers, special education teachers and other school personnel, representatives of other public and private agencies, and persons concerned with the needs of individuals with exceptional needs.

Community Advisory Committee Responsibilities

California Education Code 56194 (Note: not limited to the following items)

- A. Advising the policy and administrative entity of the SELPA regarding the development, amendment, and review of the local plan. The entity shall review and consider comments from the CAC.
- B. Recommending annual priorities to be addressed by the local plan.
- C. Assisting in parent education and in recruiting parents and other volunteers who may contribute to the implementation of the plan.
- D. Encouraging community involvement in the development and review of the local plan.
- E. Supporting activities on behalf of individuals with exceptional needs.
- F. Assisting in parent awareness of the importance of regular school attendance.

What is a SELPA?

SELPA = Special Education Local Plan Area

- A single district SELPA is one that is of sufficient size and scope to provide all of the special education services within the district's geographical boundaries.
- LAUSD is a single district SELPA.



What is the Local Plan?

The Local Plan is a document that describes LAUSD policies, procedures and programs regarding special education that are consistent with state laws and regulations. The Local Plan describes how LAUSD provides services to students with exceptional needs.

The SELPA Local Plan for Special Education

California Education Codes §56001(f) & §56205-56208

- In California, special education programs are provided under a SELPA Local Plan in order to ensure access to special education services for all individuals with exceptional needs ages birth to 22 who reside in the geographic area served by the Local Educational Agency (LEA).
- In adopting the Local Plan, the District agrees to carry out the duties and responsibilities assigned to it within the Local Plan.

Expectations of the Community Advisory Committee Members

2017-2018

California Education Code sections 56190-56194, mandates LAUSD to deliver quality special education services, in compliance with federal and state laws, to all children with disabilities within the LAUSD Special Education Local Plan Area (SELPA) and therefore is required to establish a Community Advisory Committee (CAC).

The Parent and Community Services will convene monthly CAC meetings throughout the school year in addition to meetings for the purpose of orientation, officer's election, trainings and or special meetings.

Meetings will be held at the Office of Parent and Community Services (PCS):

Located at: 1360 W. Temple Street
 Los Angeles, CA 90026
 (213) 481-3350

CAC Officers and Responsibilities



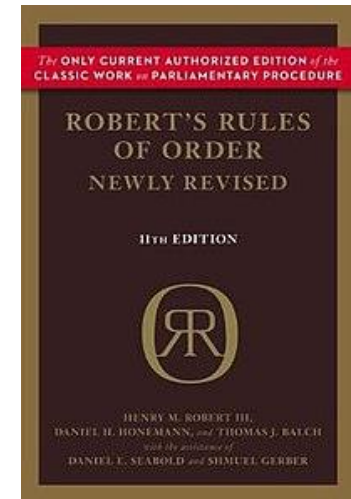
The PUBLIC RELATIONS OFFICER shall:

- Announce public comment on the agenda
- Promote the actions and purpose of the CAC to the public
- Represent the opinions of the CAC when authorized by the District



The PARLIAMENTARIAN shall:

- Be knowledgeable about bylaws of the committee, parliamentary procedure, Robert's Rules of Order, the Brown Act and to the LAUSD's Operating Norms and Code of Conduct for Advisory Committees and School Site Councils.
- Assist the Chairperson in ensuring all rules and bylaws are followed
- Plan the agenda in collaboration with the CAC officers, PCS and/or the Division of Special Education



The SECRETARY shall:

- Conduct roll call to establish quorum at all meetings
- Submit original minutes of all regular and special meetings of the CAC to PCS within two weeks of the prior meeting for translation and duplication
- Plan the agenda in collaboration with the CAC officers, PCS and/or the Division of Special Education
- Assist the Chairperson as needed

The VICE-CHAIRPERSON shall:

- Be a parent of a pupil with exceptional needs or disabilities currently enrolled in public or private schools within the LAUSD including District-contracted non-public school placements and District-contracted charter schools participating in the local plan
- Act as the Chairperson or in assigned duties in the absence of the Chairperson (see Chairperson's duties above).
- Plan the agenda in collaboration with the CAC officers, PCS and/or the Division of Special Education

The CHAIRPERSON shall:



- Be a parent of a pupil with exceptional needs or disabilities currently enrolled in public or private schools within the LAUSD including District-contracted non-public school placements and District-contracted charter schools participating in the local plan
- Preside at all the CAC meetings
- Sign all letters, reports and other communication of the CAC
- Plan the agenda in collaboration with the CAC officers and PCS staff and/or the Division of Special Education
- Be fair and impartial at all times. The Chairperson will maintain a position of impartiality and help to preserve an objective and impersonal approach, especially when serious divisions of opinion arise
- Perform additional duties appropriate to the Chairperson position
- Acknowledge participation in the development of the local plan on behalf of the CAC

Roll Call



Review of Officer Election Guidelines 2017-2018



Community Advisory Committee 2017-2018 Officer Election Guidelines

1. Members can self-nominate or nomination can be made by others.
2. Members are to sit in a designated area separate from the public and/or guests and must remain in their seats during the voting process.
3. If a member leaves the room, and returns during the voting process, the member will not be seated in the designated voting area until the current round of votes are completed.
4. Nominees must be present to be nominated and/or elected.
5. All voting will be conducted by a roll call vote.
6. All electronic devices including cell phones must be put on silent mode during the election. No texting is permitted during the election.
7. All members must be attentive to the person facilitating the election (electioneer). Sidebar conversations are not permitted.
8. No campaigning or soliciting of votes will be permitted.
9. Each candidate will have up to two (2) minutes to speak. Please adhere to the time limit.
10. Any irregularities during the process may result in the participant being disqualified from voting.
11. Candidates must receive a majority vote of the members present.
12. A run-off election is held among the top two (2) vote-getters when no one receives a majority of the votes of the members present.

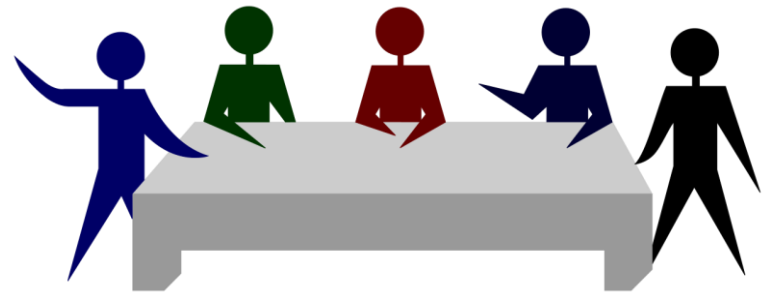


Comité Asesor Comunitario Directrices para las Elecciones de Funcionarios de 2017-2018

1. Los miembros pueden nominarse u otros pueden nominar.
2. Los miembros deben sentarse en un área designada, separados del público y/o invitados y deben permanecer en sus asientos durante el proceso de votación.
3. Si un miembro sale de la sala y regresa durante el proceso de la votación, el miembro no se sentará en el área asignada durante la votación hasta que se realice la votación.
4. Los nominados deben estar presentes para ser nominados y/o electos.
5. Toda votación se realizará mediante el proceso de voto en voz alta por lista de asistencia.
6. Se debe configurar todos los aparatos electrónicos a estar en silencio o en vibración que incluye teléfonos móviles durante la elección. No se permite enviar textos telefónicos durante las elecciones.
7. Todos los miembros deben prestar atención a la persona que facilita las elecciones. No se permiten las conversaciones laterales.
8. No se permite hacer campaña, ni solicitar votos.
9. A cada nominado se le permite hasta dos (2) minutos para hablar. Por favor obedezca al límite de tiempo.
10. Cualquier irregularidad durante el proceso puede resultar en que el participante sea descalificado de la votación.
11. Los candidatos deben obtener la mayoría de los votos de los miembros presentes.
12. En situaciones cuando un candidato no reciba la mayoría del voto, se realizará una elección de segunda vuelta entre los dos (2) candidatos que recibieron la mayor cantidad de votos de los miembros presentes.

ELECTIONS OF OFFICERS

- Public Relations Officer
- Parliamentarian
- Secretary
- Vice-Chairperson
- Chairperson





CAC OFFICERS
2017

REVIEW OF REIMBURSTMENT FORM

Los Angeles Unified School District / Distrito Escolar Unificado de Los Angeles
Parent, Community and Student Services / Oficina de Servicios para los Padres, los Estudiantes y la Comunidad

Reimbursement Form [Formulario de Reembolso]

District Committees/Comités a Nivel Distrito
Complete in ink/Llene la información en tinta

Refer to the reverse side of this form for instructions before completing. / Lea las instrucciones atrás antes de completar.

Please check one/ Favor marque uno: ☐ Parent/Padre ☐ Community/Comunidad

Name [Nombre] _____
(Please Print) [Letra de molde por favor] Last (Apellido) _____ First (Nombre) _____

Address [Dirección] _____
Street [Calle] Apt # City [Ciudad] Zip Code [Zona Postal] _____

Home Phone [Teléfono de la Casa] () _____ Cell Phone [Teléfono Celular] () _____
Area Code [Código del Área] Area Code [Código del Área]

School/Agency _____ Local District _____ Email Address _____
[Escuela/Agencia] [Distrito Local] [Correo electrónico]

Select Committee/Seleccionar un comité:
District English Learner Advisory Committee (DELAC) ☐ Parent Advisory Committee (PAC) ☐ Community Advisory Committee (CAC) ☐
[Comité del Distrito para Aprendices de Inglés (DELAC)] [Comité Asesor de Padres (PAC)] [Comité Asesor Comunitario (CAC)]

Other/Otro ☐ _____

Check Type of Activity: [Marque el Tipo de Actividad:]

Regular Meeting/Reunión Ordinaria ☐ Training/Capacitation ☐ Conference Attendance/Asistencia a conferencia ☐
☐ Representative [Representante] ☐ Alternate [Suplente] ☐ Other/Otro _____

Date of meeting / fecha de la reunión: _____ Site of meeting / Lugar de la reunión: _____

Hours attended [Horas de asistencia]: From _____ To _____
[De] [A]

A. TRANSPORTATION [TRANSPORTE] Please circle one/favor marque uno:

Actual Expenses [Gastos Reales]

1. Auto: Number of miles traveled round trip _____ \$ _____
[Automóvil: Número de millas recorridas de ida y vuelta]
(Starting point is the school that is being represented) [La escuela representada es el punto de partida]

2. Bus Fare @ Current Cost [Tarifa del Autobús al Costo] _____ \$ _____

3. Parking fee only when pre-authorized [Estacionamiento con autorización previa] _____ \$ _____

ATTACH PARKING RECEIPT/AJUNTE RECIBO

TOTAL REIMBURSEMENT [REEMBOLSO TOTAL] \$ _____
AFFIDAVIT [AFIDÁVIT]

B. CHILDCARE [Age 13 is the maximum age for childcare]/ CUIDADO DE NIÑO/A [La edad máxima para el cuidado de niños es 13 años]

List the names and ages of your children under five years of age who qualify you for reimbursement. Persons requesting childcare reimbursement must provide documentation including a copy of the birth certificate, or a Record of Birth; or a current court order demonstrating guardianship and control over the educational rights for the child under five. The documentation will remain confidential and will not be used for any other purpose. Please provide the name of the person providing childcare (excluding spouses) for each meeting of which the childcare reimbursement is requested. If the child who qualifies the parent for reimbursement is of school age, and he or she is absent from school, staff will verify with the school. Escriba los nombres y edades de sus hijos con menos de 5 años quienes califican para el reembolso. Los solicitantes para reembolso por cuidado de niños deben proveer documentación que incluye una copia de la partida de nacimiento o un registro de nacimiento; o una copia vigente de la orden judicial que demuestra la tutela o control sobre los derechos educacionales del niño menos de 5 años. La documentación se mantendrá confidencial y no se utilizará por cualquier otro motivo. Favor de proveer el nombre de la persona quien provee el cuidado del niño (no incluye a cónyuges) para cada reunión para la que se solicita reembolso. Si el niño que califica un reembolso para el padre es de edad escolar y él o ella está ausente de la escuela, el personal verificará con la escuela.

Number of hours _____ Per hour rate \$ _____ Maximum \$5.03 per hour = _____
[Número de horas] [Tarifa por hora] [Máximo de \$5.03 por hora]

Name of Child _____ Date of Birth _____ Age: _____
[Nombre del niño] [Fecha de nacimiento] [Edad]

Provide reason, if over 5 years of age _____ School _____ Student ID # _____
[Proveer motivo, si es mayor de cinco años] [Escuela] [Número de ID del estudiante]

Name of childcare provider _____
[Nombre del proveedor de cuidado] Last name [Apellido] First name [Nombre]

Only one reimbursement per family (per meeting) will be allowed. Solamente se permitirá un formulario de reembolso por familia (por cada reunión).
Only committee members are eligible to receive reimbursement. Solamente miembros del comité son elegibles para recibir reembolsos.
Members and alternates must be present at meetings for at least two hours to be eligible to receive reimbursement.
Los miembros y suplentes deben permanecer presentes en las reuniones por lo mínimo dos horas para ser elegibles para recibir reembolso.

I declare under penalty of perjury that the above is a true and accurate statement of information requested. I am only requesting ONE reimbursement per day/per meeting. Yo declaro, bajo pena de perjurio, que lo anterior es una declaración verdadera y exacta de la información solicitada. Solamente solicito UN reembolso por día/por reunión.

Parent's Signature [Firma del Padre] _____ Date [Fecha] _____

TO BE COMPLETED BY DISTRICT PERSONNEL [A SER COMPLETADO POR EL PERSONAL DEL DISTRITO]

Administrator's Signature (Name and Title) _____ Program Code [Código del Programa] _____

Thank You

