



Pennsylvania Rehabilitation Council

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email racucpca@ucpcentralpa.org www.parac.org

APPOINTMENT REQUEST FORM

NAME

* HOME ADDRESS (include geographic region – i.e. western PA, southeastern PA, etc.)

PHONE

FAX

EMAIL (if applicable)

EMPLOYER (if applicable)

ADDRESS

Underline the category/categories that you could represent on the council (underline as many as apply):

PHONE

FAX

EMAIL (if applicable)

PLEASE CHECK WHICH APPLIES TO YOU:

Appointment Reappointment
 Current Member Changing Category of Representation

(responding to these questions is voluntary) -- ARE YOU:
A PERSON WITH A DISABILITY? YES NO

If Yes, Nature of Disability _____

A FAMILY MEMBER OF A PERSON W/ A DISABILITY?
 YES NO

If Yes, Nature of Disability _____

State Independent Living Council (SILC)
Individuals with Disabilities Act (IDEA)
Client Assistance Program (CAP)
OVR Customer (Past/Present)
Human Resources Investment Council (HRIC)
State Dept. Of Education
Rehabilitation Counselor
Community Rehab Provider
Education Service Provider
Business/Labor/Industry
Physical Disability
Cognitive Disability
Sensory Disability
Psychiatric Disability
Intellectual Disabilities
General Advocate

**ORGANIZATION REPRESENTING (if applicable)

OTHER AFFILIATIONS/ORGANIZATIONS

BRIEFLY DESCRIBE HOW YOUR SKILLS, EXPERIENCE, ETC. MATCH THE ROLE AND RESPONSIBILITIES OF THE REHABILITATION COUNCIL.

SIGNATURE

DATE

**Please Attach a Resume or Brief Biography and two written references. Documents should be emailed to racucpca@parac.org in word document format.*

NOTE: A member appointed to finish out the term of their predecessor **IS NOT** eligible to serve out two, three year terms for a total of six years. The member would serve the number of years left in their predecessor's term plus one additional three year term.

* This information is required by the Executive Office for all appointments made by the Governor.

** Please Note: RC appointments are by individual, not organization. Alternates may attend as members of the general public, however they may not vote on any action items.

Form revised 01/17.