

# SETA HEAD START/EARLY HEAD START

925 Del Paso Blvd., Suite 100, Sacramento, CA 95815  
(916) 263-3804

Please submit the completed application to: [Gaylon.Ndiaye@seta.net](mailto:Gaylon.Ndiaye@seta.net)

## Policy Council/Parent Advisory Community Agency Representative Application

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Name of Agency:	
Agency Contact Name:	
Address:	
City, State, ZIP Code:	
Telephone:	
Fax:	
e-mail address:	

Please answer each question:

1. What resource information could your agency provide that is beneficial to parents and community members?

2. Is your agency requesting to be a candidate for community agency representative seat on Policy Council?

Please check ☐ YES ☐ NO

3. Is your agency requesting to be a candidate for community agency representative seat on Parent Advisory Committee?

Please check ☐ YES ☐ NO

4. Please attach program information with application