



STATE OF MICHIGAN
DEPARTMENT OF EDUCATION
LANSING




JENNIFER M. GRANHOLM
GOVERNOR

MICHAEL P. FLANAGAN
SUPERINTENDENT OF
PUBLIC INSTRUCTION

May 28, 2007

MEMORANDUM

TO: State Board of Education

FROM: Michael P. Flanagan, Chairman 

SUBJECT: Approval of Nominations to the Special Education Advisory Committee

The Special Education Advisory Committee (SEAC) advises the State Board of Education on matters concerning the education of children with disabilities. The Individuals with Disabilities Education Improvement Act, as amended in 2004, requires that this advisory committee include a 51% representation of persons with, or parents of children with, disabilities (ages birth through 26).

The terms of fifteen organizational representatives and three at-large members will expire on June 30, 2007. At its May 2007 meeting, members of the State Board of Education received information concerning the membership terms and were asked to submit nominations for the at-large vacancies. Organizations were also notified of the need to receive their nominations.

Attachment A lists the organizations currently represented on the SEAC. Attachment B lists the names of individuals nominated to fill the at-large and organizational membership vacancies and describes the respective terms each will serve, if approved for appointment. The biographical resumes of those persons nominated are found in Attachment C.

It is recommended that the State Board of Education approve the nominees listed in Attachment B of the Superintendent's memorandum of May 28, 2007 and appoint those individuals to serve as members of the Special Education Advisory Committee for the respective terms specified.

STATE BOARD OF EDUCATION

KATHLEEN N. STRAUS – PRESIDENT • JOHN C. AUSTIN – VICE PRESIDENT
CAROLYN L. CURTIN – SECRETARY • MARIANNE YARED MCGUIRE – TREASURER
NANCY DANHOF – NASBE DELEGATE • ELIZABETH W. BAUER
REGINALD M. TURNER • CASANDRA E. ULBRICH

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www.michigan.gov/mde • (517) 373-3324

**ORGANIZATIONS REPRESENTED ON THE
SPECIAL EDUCATION ADVISORY COMMITTEE**

Organization	Acronym
1. American Federation of Teachers Michigan	AFTMi
2. The Arc Michigan	Arc
3. Autism Society of Michigan	ASM
4. Citizens Alliance to Uphold Special Education	CAUSE
5. Council for Exceptional Children	CEC
6. Learning Disability Association of Michigan	LDAM
7. Michigan Association for Children with Emotional Disorders	MACED
8. Michigan Association for Supervision and Curriculum Development	MASCD
9. Michigan Association of Administrators of Special Education	MAASE
10. Michigan Association of Intermediate School Administrators	MAISA
11. Michigan Association of Intermediate Special Ed. Administrators	MAISEA
12. Michigan Association of Learning Disabilities Educators	MALDE
13. Michigan Association of Local Special Education Administrators	MALSEA
14. Michigan Association of Teachers of Children with Emotional Impairments	MATEDC
15. Michigan Association of Nonpublic Schools	MANS
16. Michigan Association of Public School Academies	MAPSA
17. Michigan Association of School Administrators	MASA
18. Michigan Association of School Boards	MASB
19. Michigan Association of School Social Workers	MASSW
20. Michigan Association of School Psychologists	MASP
21. Michigan Association of Secondary School Principals	MASSP
22. Michigan Education Association	MEA
23. Michigan Speech-Language-Hearing Association	MSLHA
24. Michigan Transition Services Association	MTSA
25. Statewide Parent Advisory Committee	SPAC

In addition to the organizational seats, eight at-large members are nominated directly by the State Board of Education. Presently, three of the at-large seats are included for renomination to the SEAC.

Four alternates have been nominated by their organizations for the terms indicated on the biographical forms.

SPECIAL EDUCATION ADVISORY COMMITTEE**Individual Nominations to Fill Vacancies and
their Respective Terms of Service
(6/2007)**

Name	Representing	Length of Term
Debra Brinson*	MASB	July 1, 2007 - June 30, 2010
Cindy Bush	CEC	July 1, 2007 - June 30, 2010
Thomas Caldwell	MAISA	July 1, 2007 - June 30, 2010
Frederick Cromie*	MASSP	July 1, 2007 - June 30, 2009
¹ Jonelle Gillette*	MSLHA	July 1, 2007 - June 30, 2010
³ Darlene Heard-Thomas*	Member-At-Large	July 1, 2007 - June 30, 2008
¹ Doris Higgs*	MACED	July 1, 2007 - June 30, 2010
² Bob Hove*	MASP	July 1, 2007 - June 30, 2009
Jill Jacobs*	MANS	July 1, 2007 - June 30, 2010
Terri Johnson	MAASE	July 1, 2007 - June 30, 2010
¹ Christopher J. Korbel	MEA	July 1, 2007 - June 30, 2010
Kathleen Kosobud*	LDAM	July 1, 2007 - June 30, 2008
Sheri Kraft*	MALDE	July 1, 2007 - June 30, 2010
Diane Lanham	MALSEA	July 1, 2007 - June 30, 2010
² David Overly	Member-At-Large	July 1, 2007 - June 30, 2009
² Richard Spring	MATCEI	July 1, 2007 - June 30, 2009
¹ Chuck Stockwell	MAPSA	July 1, 2007 - June 30, 2010
² Jan VanGasse*	Member-At-Large	July 1, 2007 - June 30, 2009

¹ Served one previous year on the SEAC

² Served two previous years on the SEAC

³ Served three previous years on the SEAC

*Person with or parent of a child (birth through 26) with a disability

SPECIAL EDUCATION ADVISORY COMMITTEE

Biographical Resumés

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: **July 1, 2007 – June 30, 2010**

Name: **Debra Brinson***

Business Address:

**School Community Alliance –Michigan
2525 Jolly Road, Suite 260
Okemos, Michigan 48864**

Home Address:

**11953 Valdo Drive
Eaton Rapids, Michigan 48827**

Business Telephone: **517-903-0847, ext. 22**

Home Telephone: **517-663-4665**

Business E-mail: **dbrinson@scha-mi.org**

Home E-mail: **dbrin5@aol.com**

Summer Address:

(If different than home)

Present Position:

Member, Eaton Rapids Public Schools Board; Executive Director, School Community Health Alliance of Michigan

Category ☒ Organization: **Michigan Association of School Boards**
☐ Other:
☐ Board Member's Nominee

Race: * **Caucasian**

Gender: **Female**

(*requested in order to obtain diverse representation)

Prior Experience. **Member, National Assembly on School Based Health Care
Member, Michigan Children's Special Health Care Advisory Council**

Educational and Other Organizational Affiliations:

Member, Michigan Association of School Boards

Education:

**Masters of Public Administration, Western Michigan University
Bachelor of Science in Family and Community Services, Michigan State University**

Miscellaneous Information: **Has served on National, State, City, County Coalitions and Boards dealing with Health Care issues.**

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ Yes

☐ No

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Mary L. (Cindy) Bush

Business Address:

P.O. Box 6020

1101 Red Drive

Traverse City, Michigan 49696-6020

Home Address:

2607 East Crown Drive

Traverse City, Michigan 49684

Business Telephone: 231-922-6462

Home Telephone: 231-929-4649

Business E-mail

Home E-mail:

Summer Address:

(If different than home)

**Present Position: Traverse BAY ISD Special Education
Service Area Director**

Category ☒ **Organization: Michigan Council for Exceptional Children**

☐ **Other:**

☐ **Board Member's Nominee**

Race: * Caucasian

Gender: Female

(*requested in order to obtain diverse representation)

**Prior Experience: Service Area Director; Executive Director of Special Education;
Planner/Monitor; Teacher Consultant; teacher**

Educational and Other Organizational Affiliations:

Michigan Association of Administrators of Special Education

Michigan Council for Exceptional Children

Alumni Organization: Western Michigan University and Northern Michigan University

Education:

Bachelor of Science, Western Michigan University

Masters Degree, Northern Michigan University

Miscellaneous Information

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☐ **Yes**

☒ **No**

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Thomas Caldwell, Ph.D.

Business Address:

**Iosco RESA
27 North Rempert Road
Tawas City, Michigan 48763**

Home Address:

**4780 Brookwood
Oscoda, Michigan 48750**

Business Telephone: 989-362-3006, ext. 130

Home Telephone:

Business E-mail: Caldwell@iresa.k12.mi.us

Home E-mail:

Summer Address:

(If different than home):

Present Position: Superintendent

Iosco Regional Educational Service Agency

Category ☒ **Organization: Michigan Association of Intermediate School Administrators**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian

Gender: Male

(*requested in order to obtain diverse representation)

Prior Experience: Director of Commerce – State of Arizona

Educational and Other Organizational Affiliations:

**Michigan Association of Intermediate School Administrators
Arizona Educational State Agency**

Education:

Miscellaneous Information:

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☐ **Yes**

☒ **No**

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Frederick J. Cromie*

**Business Address:
2800 Waukegan
Auburn Hills, Michigan 48326**

**Home Address:
26667 Miela Drive
Chesterfield, Michigan 48051**

**Business Telephone:
248-537-6100**

Home Telephone: 586-749-7004

**Business E-mail:
Fred.cromie@avondale.k12.mi.us**

Home E-mail

**Summer Address:
(If different than home)**

**Present Position:
Principal, Avondale High School**

Category ☒ **Organization: Michigan Association of Secondary School Principals**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian **Gender: Male**
(*requested in order to obtain diverse representation)

Prior Experience: Principal, East Detroit and Reese Public Schools; Assistant Principal, Sparta Area schools; Physical Education Instructor, Grand Valley State University, divine Child High School, Dearborn, and St. Mary's of Redford

Educational and Other Organizational Affiliations: North Central Association, Chairperson of Outcomes Accreditation; Course Work, Grand Valley State University, Central Michigan University, Saginaw State University

**Education Masters Degree, Ball State University
Bachelor of Arts, Albion College**

Miscellaneous Information: Albion College Athletic Hall of Fame; Ski Instructor for Handicapped Children; Teacher of the Year, Sparta Special Education

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ **Yes**

☐ **No**

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Jonelle Gillette*

Business Address:

**Ann Arbor Public Schools
2555 South State Street
Ann Arbor, Michigan 48104**

Home Address:

**12102 Harvest Drive
Grass Lake, Michigan 49240**

Business Telephone: 734-994-2200

Home Telephone: 517-522-3276

Business E-mail:

Gillette@aaps.k12.mi.us

Home E-mail:

jgillette44@hotmail.com

Summer Address:

(If different than home):

Present Position:

Speech Language Pathologist

Category ☒ **Organization: Michigan Speech Language Hearing Association (MSHA)**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian

Gender: Female

(*requested in order to obtain diverse representation)

Prior Experience: Past Vice President of Legislation, Michigan Speech Language Hearing Association; Past board member, Developmental Disabilities Council and Statewide Independent Living Council

Educational and Other Organizational Affiliations: Board Member, MSHA; Michigan Education Association

Education: Master of Arts and Bachelor of Science, Eastern Michigan University

Miscellaneous Information: 17 year old son has ADHD and dyslexia

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ **Yes**

☐ **No**

**Biographical Resume: Special Education Advisory Committee
Michigan State Board of Education**

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Christopher Korbel

Business Address:
Traverse Bay Intermediate School District

Home Address:
2205 Kewanee Drive
Traverse City, Michigan 49686-2035

Business Telephone: 231-922-6356

Home Telephone:
231-947-3455

Business E-mail

Home E-mail: ckorbel@mymea.org

Summer Address:
(If different than home)

Present Position Teacher
Traverse Bay Intermediate School District

Category ☒ **Organization: Michigan Education Association**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian **Gender: Male**
(*requested in order to obtain diverse representation)

Prior Experience Currently serving on the Special Education Advisory Committee
Entire career at Traverse City ISD

Educational and Other Organizational Affiliations: Association for Career and Technical Education, life member; Michigan Business Education Association; Michigan Education Association; National Education Association

Education:

Miscellaneous Information

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☐ **Yes**

☒ **No**

**Biographical Resume: Special Education Advisory Committee
Michigan State Board of Education**

Delegate Term of Appointment: July 1, 2007 – June 30, 2008

Name: Darlene Heard-Thomas*

**Business Address:
The Arc of Western Wayne County
2257 South Wayne Road
Westland, Michigan 48186**

Home Address:

Business Telephone: 734-729-9100

Home Telephone: 734-729-1860

Business E-mail: darlenet@thearcww.org

Home E-mail:

**Summer Address:
(If different than home):**

Present Position Community Advocate

Category ☐ **Organization:**
☐ **Other:**
☒ **Board Member's Nominee SEAC Member-at-Large**

Race: * African-American Gender: Female
(*requested in order to obtain diverse representation)

Prior Experience:
Disability advocate; Partners in Policymaking Graduate

Educational and Other Organizational Affiliations:

Education: Bachelor of Arts- Davenport University

Miscellaneous Information:

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ **Yes**

☐ **No**

**Biographical Resume: Special Education Advisory Committee
Michigan State Board of Education**

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Doris Higgs*

Business Address:

Home Address:

Business Telephone:

Home Telephone:

Business E-mail:

Home E-mail:

Summer Address:
(If different than home):

Present Position: Parent

Category ☒ **Organization: Michigan Association for Children with Emotional Disorders**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * African American **Gender: Female**
(*requested in order to obtain diverse representation)

Prior Experience: Mother of two children with special needs and special education certification. One child is 20 years old and the other is 17 years old and is certified as suffering from an emotional impairment. Ms. Higgs has extensive experience advocating for her children in the IEP context.

Educational and Other Organizational Affiliations:
Advocacy training through CAUSE and CHADD

Education:

Miscellaneous Information

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ **Yes**

☐ **No**

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2009

Name: Robert Hove*

Business Address:

**Shiawassee Regional Education Service Agency
1025 North Shiawassee Street
Corunna, Michigan 48847**

Home Address:

**932 North Pine River Street
Ithaca, Michigan 48847**

Business Telephone: 1-800-743-3471

Home Telephone: 989-875-4075

Business E-mail: hove@sresd.org

Home E-mail: Robert@hove.com

Summer Address:

(If different than home):

Present Position School Psychologist

Category ☒ **Organization: Michigan Association of School Psychologists**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian

Gender: Male

(*requested in order to obtain diverse representation)

Prior Experience: 22 years as a school psychologist

Educational and Other Organizational Affiliations:

**Michigan Association of School Psychologists
National Association of School Psychologists**

Education:

Masters Degree in School Psychology; Specialist in Psychological Services

Miscellaneous Information: President-Elect of Michigan Association of School Psychologists

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ **Yes**

☐ **No**

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Jill Jacobs*

Business Address:

Home Address:

**2127 Mark Avenue
Lansing, Michigan 48912**

Business Telephone:

Home Telephone: 517-485-3632

Business E-mail:

Home E-mail: bjjacobs6@hotmail.com

Summer Address:

(If different than home):

Present Position:

Member, Michigan Association of Non-Public Schools Parent Network

Category ☒ **Organization: Michigan Association on Non-Public Schools**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian

Gender: Female

(*requested in order to obtain diverse representation)

Prior Experience: Alternate, Special Education Advisory Committee

Educational and Other Organizational Affiliations: Leader in local Catholic school

Education

Miscellaneous Information:

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ **Yes**

☐ **No**

☐ No

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Kathleen Kosobud*

Business Address:

Home Address:

**2055 Pauline Court
Ann Arbor, Michigan 48103**

Business Telephone

Home Telephone: 734-995-1094

Business E-mail

Home E-mail: kosobudnk@comcast.net

Summer Address:

(If different than home)

Present Position: MSU Doctoral Program; MSU Research Assistant; Urban-Diversity Fellowship (OSEP) 2003-05; Spencer Research Training Grant – Fellowship 2006-07

Category ☒ **Organization: Learning Disabilities Association of Michigan**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian

Gender: Female

(*requested in order to obtain diverse representation)

Prior Experience: Michigan Department of Education, Professional Standards Commission for Teachers (co-chair), 7th Standard Ad Hoc Committee (for beginning teachers); Math Standard-Setting (MEAP); parent representative, IDEA Partnership Ad Hoc Family Involvement Action Team

Educational and Other Organizational Affiliations: Learning Disabilities Association, Washtenaw Chapter (past president); LDAM, past secretary, past president elect; Network of Michigan Educators; Ann Arbor Parent Advisory Committee; Council for Exceptional Children

Education: BA, University of Michigan (Theater); MA, Eastern Michigan University (Special Education); Doctoral Student in Special Education, Michigan State University

Miscellaneous Information: Board Certified Teacher (1994), Endorsements in LD & CI, interest in family-school collaboration

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ **Yes**

☐ **No**

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Sheri L. Kraft*

Business Address:
820 Spring Street
Grand Ledge, Michigan 48837

Business Telephone: 517-627-5194

Business E-mail:
krafts@glps.k12.mi.us

Home Address:
9487 Guinea Road
Grand Ledge, Michigan 48837

Home Telephone: 517-322-2361

Home E-mail:
glkraft1@yahoo.com

Summer Address: 6965 Partridge Cr.
(If different than home): Ludington, Michigan

Present Position: Teacher/Retiring 6/30/07

Category ☒ **Organization: Michigan Association of Learning Disability Educators**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian **Gender: Female**
(*requested in order to obtain diverse representation)

Prior Experience: Teaching/Teacher Consultant 34 years, LD categorical rooms, resource room, department chair

Educational and Other Organizational Affiliations:
Grand Ledge Education Association, Michigan Education Association, National Education Association

Education: Bachelor of Science, Western Michigan University; Master of Arts, Marygrove University; Special Education Supervisor Certification, Grand Valley State University; Master of Arts, Western Michigan University (25 of 30 hours completed)

Miscellaneous Information:

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ **Yes**

☐ **No**

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 - June 30, 2010

Name: Diane Lanham

Business Address:

**Mt. Morris Consolidated Schools
12356 Walter Street
Mt. Morris, Michigan 48458**

Home Address:

**194 Eaton Street
Battle Creek, Michigan 49017**

Business Telephone: 810-591-0860

Home Telephone 269-274-1124

Business E-mail:

dlanham@mtmorrischools.org

Home E-mail: dilanham@sbcglobal.net

Present Position:

Director of Student Services

Summer Address:

(If different than home)

Category ☒ **Organization: Michigan Association of Local Special Education Administrators**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian

Gender: Female

(*requested in order to obtain diverse representation)

Prior Experience: Assistant Director of Special Education, Ann Arbor Public Schools; Director of Special Education, Battle Creek Public Schools; Assistant Superintendent of Curriculum and Instruction/K-12 Principal- Kentucky School for the Deaf; Supervisor of Special Education, Calhoun Intermediate School District

Educational and Other Organizational Affiliations: Council for Exceptional Children; Association for Supervision and Curriculum Development; Michigan Association of Administrators of Special Education – President Elect 2007-08 Michigan Association of Local Special Education Administrators

Education: Bachelor of Arts-Deaf Education, Master of Arts, Instructional Development and Technology, Michigan State University; Master of Arts- Educational Leadership, Eastern Michigan University; Director of Special Education Certification, University of Kentucky; Educational Doctoral Candidate, Eastern Michigan University

Miscellaneous Information

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☐ **Yes**

☒ **No**

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2009

Name: **David Overly***

Business Address:

Home Address:

**1740 Cooley Avenue
Detroit, Michigan 48219**

Business Telephone:

Home Telephone: **313-537-0427**

Business E-mail:

Home E-mail:

davidoverly@ameritech.net

Summer Address:

(If different than home):

Present Position **Substitute Teacher**

Category ☐ Organization:

☐ Other:

☒ Board Member's Nominee **SEAC Member-at-Large**

Race:* **Caucasian**

Gender: **Male**

(*requested in order to obtain diverse representation)

Prior Experience: **Former advisor to the Michigan Commission on Handicapper Concerns; Church commission on disability concerns, Adjunct instructor, Oakland University, Lawrence Technological University; Research Analyst, Wayne State University**

Educational and Other Organizational Affiliations:

Education: **Bachelor of Arts and Master of Arts, Wayne State University**

Miscellaneous Information:

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ Yes

☐ No

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2009

Name: **Richard C. Spring**

Business Address:

Ingham Intermediate School District

Home Address:

**8145 Grossman Road
Manchester, Michigan 48158**

Business Telephone: **517-244-1393**

Home Telephone: **734-428-9425**

Business E-mail:

Home E-mail:

Summer Address:

(If different than home):

Present Position: **School Social Worker, Ingham Intermediate School District Secondary Learning Center**

Category ☒ Organization: **Michigan Association of Teachers of Children with Emotional Impairments**
☐ Other:
☐ Board Member's Nominee

Race: * **Caucasian**

Gender: **Male**

(*requested in order to obtain diverse representation)

Prior Experience: **22 years as school social worker (Beacon Day Treatment, Romulus Schools, and Webberville Schools.)**

Educational and Other Organizational Affiliations: **School Social Work Association of America; Michigan Association of School Social Workers; Midwest School Social Work Council; Governor's Task Force on Special Education; Manchester District Library President**

Education

Miscellaneous Information:

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☐ Yes

☒ No

Biographical Resume: Special Education Advisory Committee

Michigan State Board of Education

Delegate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Chuck Stockwell

Business Address:

**Charter School Partners
10051 East Highland Road
Suite 29-360
Howell, Michigan 48843**

Home Address:

Business Telephone: 810-494-4348

Home Telephone:

Business E-mail:

Home E-mail:

Summer Address:

(If different than home):

Present Position President, Charter School Partners

Category ☒ **Organization Michigan Association of Public School Academies**
☐ **Other:**
☐ **Board Member's Nominee**

Race: * Caucasian

Gender: Male

(*requested in order to obtain diverse representation)

Prior Experience: Special Education teaching assistant; Special Education teacher; Teacher Consultant for Emotionally Impaired; Learning and Adjustment; President of Michigan Association of Children with Emotional Disorders

Educational and Other Organizational Affiliations:

Smart School Management (founder and CEO); Charter School Partners

Education: Bachelor of Arts, Elementary Education, Antioch College; Special Education Teacher Certification – Temple University; Master of Arts in Learning Disabilities and Education Administration, Michigan State University; advanced graduate work in education administration, Wayne State University

Miscellaneous Information

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☐ **Yes**

☒ **No**

**Biographical Resume: Special Education Advisory Committee
Michigan State Board of Education**

Delegate Term of Appointment: July 1, 2007 – June 30, 2009

Name: Jan VanGasse*

Business Address:
**Breitung Township Schools
445 Hamilton Avenue
Kingsford, Michigan 49802**

Home Address:

Business Telephone: **906-779-2680**

Home Telephone **906-563-8791**

Business E-mail: **JVanGasse@kingsford.org**

Home E-mail:

Summer Address:
(If different than home)

Present Position **Director of Instructional Services**

Category ☐ Organization:

☐ Other:

☒ Board Member's Nominee **SEAC Member-at-Large**

Race: * **Caucasian**

Gender: **Female**

(*requested in order to obtain diverse representation)

Prior Experience **Parent Advisory Committee member, Lenawee ISD**

Educational and Other Organizational Affiliations:

Michigan Staff Development Council, Michigan Association of Supervision and Curriculum Development, Michigan School Counselor Association, Michigan Counseling Association, American Association of University Women

Education **Bachelor of Arts – University of Michigan
Master of Arts – Eastern Michigan University**

Miscellaneous Information:

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ Yes

☐ No

**Biographical Resume: Special Education Advisory Committee
Michigan State Board of Education**

Alternate Term of Appointment: July 1, 2007 – June 30, 2009

Name: Jayanne Roggenbaum

Business Address:
Bingham Farms Elementary School
2340B West Thirteen Mile Road
Bingham Farms, Michigan 48025

Home Address:
3955 Pitt Road
Waterford, Michigan 48328

Business Telephone: 248-203-3216

Home Telephone: 248-673-7225

Business E-mail:
JR10BPS@Birmingham.k12.mi.us

Home E-mail:
DJRogg@aol.com

Summer Address:
(If different than home):

Present Position: School Psychologist

Category ☐ Organization:
☒ Other: **Alternate**
☐ Board Member's Nominee

Race: * **Caucasian** Gender: **Female**
(*requested in order to obtain diverse representation)

Prior Experience: 16 years as a school psychologist

Educational and Other Organizational Affiliations:
Michigan Association of School Psychologists
National Association of School Psychologists

Education: Master of Science and Education Specialist in School Psychology

Miscellaneous Information

Federal legislation mandates that the SEAC membership be comprised of at least 51% of “persons with or parents of a child with a disability.” If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☐ Yes☒ No

**Biographical Resume: Special Education Advisory Committee
Michigan State Board of Education**

Alternate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Lynne Snyder

**Business Address:
711 St. Joseph Avenue
Berrien Springs, Michigan 49103**

**Home Address:
123 North Street
Saugatuck, Michigan 49453**

Business Telephone: 269-471-7725

Home Telephone: 269-857-5025

Business E-mail:

**Home E-mail:
lynne_snyder@hotmail.com**

**Summer Address:
(If different than home):**

**Present Position: Past President – Michigan Association of Learning Disabilities Educators
Kaleidoscope Editor**

Category ☒ **Organization: Michigan Association of Learning Disabilities Educators**
☐ **Other: Alternate**
☐ **Board Member's Nominee**

Race: * Caucasian **Gender: Female**
(*requested in order to obtain diverse representation)

**Prior Experience: University Professor in Special Education for 30 years. Currently,
Consultant for Berrien ISD**

**Educational and Other Organizational Affiliations: Council for Exceptional Children and
Michigan Association of Learning Disabilities Educators**

**Education: Bachelor of Arts, Michigan State University; Master of Arts, Western Michigan
University; Ph.D., Wayne State University**

Miscellaneous Information:

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☐ **Yes**

☒ **No**

**Biographical Resume: Special Education Advisory Committee
Michigan State Board of Education**

Alternate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Barbara Stork

**Business Address:
Michigan Association of Non-public Schools
510 South Capitol Avenue
Lansing, Michigan 48933**

**Home Address:
885 Sunrise Park Drive
Howell, Michigan 48843**

Business Telephone: 517-372-0003

Home Telephone: 517-546-6592

**Business E-mail:
bstork@M-A-N-S.org**

Home E-mail:

**Summer Address:
(If different than home):**

Present Position: Assistant Director, Michigan Association of Non-public Schools

Category ☒ **Organization: Michigan Association of Non-public Schools**
☐ **Other: Alternate**
☐ **Board Member's Nominee**

Race: * Caucasian **Gender: Female**
(*requested in order to obtain diverse representation)

Prior Experience: Has served on SEAC as a delegate member

Educational and Other Organizational Affiliations

Education Master of Education Degree

Miscellaneous Information

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☐ **Yes**

☒ **No**

**Biographical Resume: Special Education Advisory Committee
Michigan State Board of Education**

Alternate Term of Appointment: July 1, 2007 – June 30, 2010

Name: Wendy S. Minor

**Business Address:
61682 Dailey Road
Cassopolis, Michigan 49031**

**Home Address:
45862 Winchester Circle
Mattawan, Michigan 49071**

Business Telephone: 269-445-6260

Home Telephone: 269-668-8079

**Business E-mail:
wminor@remc11.k12.mi.us**

Home E-mail:

**Summer Address:
(If different than home):**

**Present Position: Monitor
Early Childhood Special Education Coordinator**

Category ☒ **Organization: Council for Exceptional Children**
☐ **Other: Alternate**
☐ **Board Member's Nominee**

Race: * Caucasian **Gender: Female**
(*requested in order to obtain diverse representation)

Prior Experience Project-find Coordinator, Infant/Toddler Teacher

**Educational and Other Organizational Affiliations:
Grand Valley State University graduate program – Special Education Supervisor Approval**

**Education:
Bachelor of Science from Western Michigan University/endorsements in learning
disabilities and early childhood**

Miscellaneous Information: Working on Master's of Education in Special Education

Federal legislation mandates that the SEAC membership be comprised of at least 51% of "persons with or parents of a child with a disability." If a parent, the child needs to be under 26 years of age and receiving special education services for the duration of the appointment. To ensure compliance relative to the 51% membership, we ask you to identify if you meet that definition.

☒ **Yes**

☐ **No**