Your Member Information

I am a paraeducator providing instructional or related support. If you are a student, professional with more than 3 years of experience, early career professional, retired professional, or a family/affiliate member, please visit exceptionalchildren.org/applications to find your application.

Member ID (if known):

Membership in CEC automatically includes membership in your state or provincial CEC Unit, where one is available.

Prefix:  Mr.  Mrs.  Ms.  Dr.

First Name:  Last Name:

Job Title (required):

School/University/Current Employer (required):

Preferred Mailing Address:

Apt/Suite/P.O. Box Number:  City:

State/Province:  Zip/Postal Code:  Country:

(outside USA & Canada, please email service@exceptionalchildren.org)

Phone:  Email Address (required):

I do not wish to receive email communications to stay current on CEC news, legislative updates, events and services.

Primary and Secondary Interests

Please circle ONE P-primary, and all S-secondary interests that apply.

- P  S  Assessment
- P  S  Autism
- P  S  Cultural and Linguistic Diversity
- P  S  Deaf/Hard of Hearing
- P  S  Developmental Delays
- P  S  Early Childhood
- P  S  Emotional/Behavioral Disorders
- P  S  Gifted and Talented
- P  S  International
- P  S  Intellectual Disabilities
- P  S  Learning Disabilities
- P  S  Moderate/Severe Disabilities
- P  S  Multiple Disabilities
- P  S  Orthopedic Impairment
- P  S  Research
- P  S  Response to Intervention
- P  S  Speech/Language/Communication Disorders
- P  S  Teacher Preparation
- P  S  Technology: Assistive
- P  S  Technology: Instructional
- P  S  Transition(s)
- P  S  Traumatic Brain Injury
- P  S  Twice Exceptional
- P  S  Visual Impairment or Blindness or DeafBlindness
### Demographics

Thank you for completing these sections on your interests and demographics. Providing this information will significantly enhance your member experience and the benefits you receive from CEC.

#### Professional Role (optional)

- [ ] Teacher
- [ ] Consultant
- [ ] Higher Education Faculty
- [ ] Retired
- [ ] College/University Student
- [ ] Early Interventionist
- [ ] Paraeducator
- [ ] Other
- [ ] Administrator
- [ ] Family Member
- [ ] Related Service Provider

#### Employment Setting:

- [ ] Private School/Facility
- [ ] College or University
- [ ] Student - Not Employed
- [ ] Public School/Facility
- [ ] Local or State/Province Educational Agency
- [ ] Retired - Not Employed
- [ ] Early Learning Program
- [ ] Non-Profit
- [ ] Other

#### Responsibility

- [ ] General Education
- [ ] Special Education
- [ ] Family/Parent
- [ ] Other

#### Age Level served

- [ ] Infants (birth - 2 years)
- [ ] Middle School or Junior High
- [ ] Postsecondary
- [ ] Early Childhood (3-5 years)
- [ ] Secondary
- [ ] All age levels
- [ ] Elementary
- [ ] School Age (k-12)
- [ ] Other

#### Year Bachelor's Degree Received:

- [ ] Not pursuing a bachelor's degree
- [ ] Yes
- [ ] No
- [ ] I'd rather not say

#### Disability:

- [ ] Yes
- [ ] No
- [ ] I'd rather not say

#### Year of birth:

- [ ] I'd rather not say

#### Ethnicity/Race:

- [ ] American Indian or Alaskan Native
- [ ] LatinX or Hispanic or ChicanX or Puerto Rican
- [ ] Middle Eastern or North African
- [ ] Other
- [ ] Asian or Asian American
- [ ] White or European American
- [ ] Multiracial
- [ ] I'd rather not say
- [ ] Black or African American
- [ ] Native Hawaiian or Pacific Islander

#### Gender

- [ ] Cis Male
- [ ] Transgender Male
- [ ] Heterosexual
- [ ] Other
- [ ] Cis Female
- [ ] Transgender Female
- [ ] Gay/Lesbian
- [ ] I'd rather not say
- [ ] Gender Queer / Gender Fluid / Gender Non-Conforming
- [ ] Bisexual
- [ ] I'd rather not say
- [ ] Other
- [ ] I'd rather not say

#### Are/Were you first-generation college bound? Check Yes or No

- [ ] Yes
- [ ] No
- [ ] I'd rather not say
Your Paraeducator Membership Options

<table>
<thead>
<tr>
<th>Membership Level</th>
<th>Paraeducator Member Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premier</td>
<td>$135</td>
</tr>
<tr>
<td>Full</td>
<td>$80</td>
</tr>
<tr>
<td>Basic</td>
<td>$40</td>
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</tbody>
</table>

Add One or More Optional Special Interest Divisions

<table>
<thead>
<tr>
<th>Division Name</th>
<th>Special Interest Division Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complex and Chronic Conditions: The Division for Physical, Heath and Multiple Disabilities</td>
<td>$15</td>
</tr>
<tr>
<td>Council for Educational Diagnostic Services</td>
<td>CEDS</td>
</tr>
<tr>
<td>Division on Autism and Developmental Disabilities</td>
<td>DADD</td>
</tr>
<tr>
<td>Division for Visual and Performing Arts Education</td>
<td>DARTS</td>
</tr>
<tr>
<td>Division for Communication, Language, and Deaf/Hard of Hearing</td>
<td>DCD</td>
</tr>
<tr>
<td>Division on Career Development and Transition</td>
<td>DCDT</td>
</tr>
<tr>
<td>Division for Culturally and Linguistically Diverse Exceptional Learners</td>
<td>DDEL</td>
</tr>
<tr>
<td>Division for Early Childhood</td>
<td>DEC</td>
</tr>
<tr>
<td>Division of International Special Education and Services</td>
<td>DISES</td>
</tr>
<tr>
<td>Division for Learning Disabilities</td>
<td>DLD</td>
</tr>
<tr>
<td>Division on Visual Impairments and Deafblindness</td>
<td>DVIDB</td>
</tr>
<tr>
<td>Innovations in Special Education Technology Division</td>
<td>ISET</td>
</tr>
<tr>
<td>The Association for the Gifted</td>
<td>TAG</td>
</tr>
</tbody>
</table>

Payment Summary

Please return complete application and full payment to: CEC, PO Box 79026, Baltimore, MD 21279-0026 | FAX: 703.264.9494 | service@exceptionalchildren.org

| CEC Paraeducator Member dues | $ |
| Special Interest Division dues from above | $ |
| Total | $ |

Method of Payment

Credit Card (in U.S. Funds)  VISA  Mastercard  Discover  American Express
Card # ________________________  Expiration Date ________________________  Security Code ________________________

Billing Address ________________________
Name on Card ________________________  Signature ________________________  (required)
Check # (in U.S. Funds) (Payable to the Council for Exceptional Children)  Purchase Order # (Copy of Purchase Order must be attached)  

Membership in CEC is individual-based and is non-transferable and non-refundable