OAKLAND UNIFIED SCHOOL DISTRICT

Office of the Superintendent of Schools

April 22, 2015

Legislative File	
File ID Number:	15-0604
Introduction Date:	04/22/2015
Enactment Number:	15-0515
Enactment Date:	4/22/15
By:	0.12

TO: Board of Education

FROM: Antwan Wilson, Superintendent

Brigitte Marshall, Chief Talent Officer, Talent Development Divisio

SUBJECT: Application for One (1) Emergency Bilingual Spanish Variable Term Waiver

ACTION REQUESTED

Approval by the Board of Education of Resolution No. 1415-1100, for One (1) Emergency Bilingual Spanish Variable Term Waiver.

BACKGROUND

The Commission on Teacher Credentialing (CTC) has the authority to issue waiver documents to allow employers to employ or assign persons who are not appropriately credentialed for a teaching and/or administrative assignment. Waivers are issued or denied based on the Commission's established criteria and factors such as an employer's continuing needs; the support the employer will provide to the applicant; or extenuating, extraordinary and unanticipated circumstances.

The District currently faces a critical shortage of teachers who are qualified to teach in Bilingual classrooms, and who can provide instruction in the primary language to Limited English Proficient students.

The District has reviewed its staffing needs, conducted a diligent search for this position, and all attempts have been made to fill this position with an appropriately credentialed candidate.

A fully credentialed candidate was not available, and diligent search was conducted to recruit candidates in this order:

- · A candidate who is scheduled to complete his or her preliminary credential requirements within six months
- A candidate who is qualified to participate and to enroll in an internship program
- · A candidate who qualifies to use a local assignment option
- A candidate who qualifies for the Provisional Internship Permit (PIP) or the Short Term Staff Permit (STSP)

The District has been unable to find an individual who qualifies for one of the staffing options listed above, and a Emergency Bilingual Spanish Variable Term Waiver is being requested for the most qualified candidate.

DISCUSSION

Ms. Shahidinejad is a Spanish speaking native from El Salvador, Central America. She holds a Preliminary Multiple Subject Credential. Ms. Shahidinejad graduated from Boston University with a Bachelor's Degree in Early Childhood Education. She also holds an out-of-state (Massachusetts) Early Childhood PreK-2 Certification. This waiver allows her time to complete requirements for CSET World Languages: Spanish III, IV, V exams.

One (1) individual is being recommended for Variable Term Bilingual Language Authorization Spanish (BCLAD) Variable Term Waiver so she may work in the District for the 2014-2015 school year.

• Sasha Shahidinejad, Emergency Bilingual Spanish BCLAD Variable Term Waiver, LaEscuelita, Grade 2

FISCAL IMPACT

None.

RECOMMENDATION

Approval by the Board of Education of Resolution No. 1415-1100, for One (1) WV1 credential applications recommending approval for One (1) Emergency Bilingual Spanish Variable Term Waiver.

RESOLUTION OF THE BOARD OF EDUCATION OF THE OAKLAND UNIFIED SCHOOL DISTRICT

OAKLAND UNIFIED SCHOOL DISTRICT Resolution No. 1415-1100

- In Support of One (1) Emergency Bilingual Spanish Variable Term Waiver -

WHEREAS, the Board of Education, may approve an application to the California Commission on Teacher Credentialing seeking an Emergency Bilingual Spanish Variable Term Waivers as may be necessary for a certificated employee of the District for a specific period of time, and

NOW, THEREFORE, BE IT RESOLVED that approval is given supporting applications to the California Commission on Teacher Credentialing for One (1) Bilingual Spanish Variable Term Waiver to be issued to the following individual so they may work in the District for the 2014-2015 school year:

Sasha Shahidinejad, LaEscuelita, Grade 2

Passed by the following vote:

AYES:

Roseann Torres, Jumoke Hinton Hodge, Nina Senn, Aimee Eng, Shanthi Gonzales, Vice President

Jody London, President James Harris

NOES:

None

ABSTAINED:

None

ABSENT:

None

I hereby certify that the foregoing is a full, true and correct copy of a Resolution passed at a Regular Meeting of the Board of Education of the Oakland Unified School District held April 22, 2015.

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OAKLAND UNIFIED SCHOOL DISTRICT

James Harris

President, Board of Education

Antwan Wilson

Superintendent and Secretary, Board of Education



Commission on Teacher Credentialing Certification Division ATTN: Waiver Unit 1900 Capitol Avenue Sacramento, CA 95811-4213 Email: waivers@ctc.ca.gov Website: www.ctc.ca.gov

CTC Use Only

	CTC	Use	Only
W		. ;	Z

VARIABLE TERM WAIVER REQUEST (WV1 Form)

1.	EMPLOYING AGENCY (include mailing address)	County/District	Contact Person:
0	akland Unified School District	CDS Code	Credential Analyst
	900 Broadway, Suite 295 akland, CA 94607	01-61259	Telephone #: (510) 879-0202
	NPS/NPA (list county code)		EMail:
2.	APPLICANT INFORMATION:		
	Social Security or Individual Tax Identification	Number:	
	All applicants must answer professional fitness questions		on if fingerprint clearance is not on file
	CTC, a completed Live Scan receipt (41-LS) must be si		
	Division of Professional Practices will be concluded before	re u waiver approval	letter will be issued.
	Full Legal Name Shahidinejad	Sasha	G
	Last	First	Middle
	Former Name(s)	D:	ath Data
	rolling rallie(3)	D.	rth Date
		,DI	rth Date
	Applicant's Mailing Address	В	rth Date
	Applicant's Mailing Address		
	Applicant's Mailing Address Phone#	Email sasha.s	
	Applicant's Mailing Address Phone# Waiver Title Emergency BCLAD © Sports	Email sasha.s	shahidinejad@ousd.k12.ca.u
	Applicant's Mailing Address Phone#	Email sasha.s	shahidinejad@ousd.k12.ca.u
	Phone# Waiver Title Emergency BCLAD © Sport (List the specific title and subject area of the credential one that is available under current regulations.)	Email Sasha.s	shahidinejad@ousd.k12.ca.u
	Phone# Waiver Title Emergency BCLAD © Sport (List the specific title and subject area of the credential	Email sasha.s OISY al that authorizes the	shahidinejad@ousd.k12.ca.L assignment. Note that the subject must
	Applicant's Mailing Address Phone# Waiver Title Emergency BCLAD © Space (List the specific title and subject area of the credential one that is available under current regulations.) Assignment 2nd Grade Bilingual (Spanish Indicate specific position and grade level (e.g. chemister)	Email sasha.s OIS N al that authorizes the n) Teacher stry teacher, grades if	shahidinejad@ousd.k12.ca.u assignment. Note that the subject must b
	Applicant's Mailing Address Phone# Waiver Title Emergency BCLAD © Space (List the specific title and subject area of the credential one that is available under current regulations.) Assignment 2nd Grade Bilingual (Spanish	Email sasha.s OIS N al that authorizes the n) Teacher stry teacher, grades if	shahidinejad@ousd.k12.ca.u assignment. Note that the subject must b
	Phone# Waiver Title Emergency BCLAD Co Sport (List the specific title and subject area of the credential one that is available under current regulations.) Assignment 2nd Grade Bilingual (Spanish Indicate specific position and grade level (e.g. chemister) • For bilingual assignment list LANGU	Email sasha.s OISY al that authorizes the n) Teacher stry teacher, grades if	shahidinejad@ousd.k12.ca.u assignment. Note that the subject must b

3.	EDUCATION CODE OR TITLE 5 SECTION TO BE WAIVED
	Specific section(s) covering the assignment: 44225
4.	Waivers are dated effective the beginning date of service. Provide the ending date of your school term, track or year below. A justification <i>must</i> be included if the expiration date extends beyond the term, track or year. Effective Dates (mm/dd/yyyy): 0 / 15 to 08 / 15 / 2015 Ending date of school term, track, or year:/
5.	STATEWIDE HIGH INCIDENCE AREA WAIVER REQUESTS: a. INDICATE THE SHORTAGE AREA FOR THE ASSIGNMENT Special Education Driver Education and Training Clinical or Rehabilitative Services Speech-Language Pathology Services
	b. INDICATE WHAT WAS DONE THIS YEAR TO LOCATE AND RECRUIT INDIVIDUALS TO FILL THIS POSITION No copies are necessary if this is a recognized high incidence area. Advertised in local/national Contacted IHE placement centers newspapers Distributed job announcements Advertised in professional journals Internet Attended job fairs in California Attended recruitment out-of-state
	Other

c. IF THIS IS AN INITIAL WAIVER REQUEST, EXPLAIN WHAT MAKES THE APPLICANT THE BEST CANDIDATE

Include detailed information about the individual's professional preparation and expertise in the subject/area requested and attach appropriate documentation including transcripts, examination score reports, and verification of experience.

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6. NON STATEWIDE NON SHORTAGE AREA WA	VIVER REQUESTS:	
a. INDICATE THE LOW INCIDENCE AREA FOR THE ASSIGNMENT		
Administrative Services	Multiple Subject Teaching	
Single Subject Teaching (all subject areas)	Pupil Personnel Services: Counseling, Psychology, Social Work	
Designated Subjects – except driver	Reading Specialist/Certificate	
education and training	Teacher of English Learner Students	
Teacher Librarian Services		
b. INDICATE WHAT WAS DONE THIS YEAR THIS POSITION	TO LOCATE AND RECRUIT INDIVIDUALS TO	
Copies of announcements, advertisements, we	eb site registration, etc. must be attached.	
The employer must verify all of the	Optional recruitment methods:	
following:	Advertised in local/national newspaper	
Distributed job announcements	Attended job fairs in California	
Contacted IHE placement centers	Attended recruitment out-of-state	
Internet (i.e. www.edjoin.org)	Advertised in professional journals	
	Other Out of Country Recruitment	
c. PROVIDE DETAILED INFORMATION ABOUT BE SURE TO ANSWER EACH OF THE FOLL How many individuals credentialed in the autapplied for the position?		
How many individuals credentialed in the autwere interviewed?	thorization of the waiver request 23	
What were the results of those interviews? (I Applicant(s) withdrew	Please indicate answers in numbers)	
Candidate(s) declined job offe	r	
O8 Candidate(s) found unsuitable	for the assignment	
d. PROVIDE THE SPECIFIC EMPLOYMENT C What special skills and knowledge are needed should also be described in your recruitment.	d to successfully perform in this position? These	
Spanish speaking, writing and reading. A classroom settings.	Academic expertise, training in bilingual	

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e.	IF THIS IS AN INITIAL	WAIVER REQUEST,	EXPLAIN	WHAT M	AKES THE	APPLICANT '	THE
	BEST CANDIDATE						

Include detailed information about the individual's professional preparation and expertise in the subject/area requested and attach appropriate documentation including transcripts, examination score reports, and verification of experience.

Ms. Shahidinejad is a Spanish speaking native from El Slavador, Central America. She holds a Preliminary Multiple Subject Credential. Ms. Shahidinejad graduated from Boston University with a Bachelor's Degree in Early Childhood Education. She also holds and out of state (Massachusetts) Early Childhood PreK-2 Certification. This waiver allows her time to complete requirements for CSET World Languages: Spanish III, IV, V exams.

7. REQUIREMENTS AND TARGET COMPLETION DATES FOR REACHING CREDENTIAL GOAL
List the requirements that the applicant must complete to be eligible for the credential along with the
credential goal and target date by which he or she plans to complete those requirements

PROGRAM, COURSE, EXAMINATION, EXPERIENCE	TARGET COMPLETION DATE
CSET World Language Exam III, IV, V (Spanish)	8/1/2015

8.	LIST THE NAME AND POSITION OF THE PERSON ASSIGNED TO PROVIDE SUPPORT A	ND
	ASSISTANCE TO THE APPLICANT DURING THE TERM OF THIS WAIVER	

By assigning this individual, the employing agency makes a commitment to provide orientation, guidance and assistance to the applicant, as feasible, in completing the requirement(s) listed above.

Name Tammy Rose	Principal Principal
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9. SUBSEQUENT WAIVER REQUESTS

- Attach a copy of a personnel evaluation that verifies the applicant served satisfactorily in the position authorized by the previous waiver.
- Attach supporting documentation

10. IS THIS EMPLOYING AGENCY GEOGRAPHICALLY ISOLATED? Would the applicant have to travel more than 1 1/2 hours one-way to attend an institution with an approved program to meet the credential goal? Not applicable (program completion is not a requirement) 11. PROFESSIONAL FITNESS QUESTIONS (to be answered by the applicant) Answers to the following questions are required. If you answer yes to any question, you must complete the corresponding Professional Fitness Explanation Form. Before granting your application, the Commission will review, at a minimum: • Federal Bureau of Investigation criminal history (rap sheet) • California Department of Justice criminal history (rap sheet) International database of teacher misconduct maintained by the National Association of State Directors of Teacher Education and Certification (NASDTEC) Previous reviews by the Commission • Complaints from others Notifications from school districts • Teacher preparation test score violations You must disclose misconduct, even if: It happened a long time ago • It happened in another state, federal court, military or jurisdiction outside the United States • You did not go to court and your attorney went for you • You did not go to jail or the sentence was only a fine or probation • You received a certificate of rehabilitation Your conviction was later dismissed (even if under Penal Code section 1203.4), expunged, set aside or the sentence was suspended Warning: Failure to disclose any information requested is falsification of your application and the Commission may reject or deny your application or take disciplinary action against your document. Do you understand: these instructions and; that you will later declare under penalty of perjury that the information you give is true and correct and: • the Commission may reject your application if it is incomplete and; the Commission may deny your application or take disciplinary action against your document if you do not disclose misconduct? No

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a. Have you ever been:
• dismissed or,
• non-reelected or.
 suspended without pay for more than ten days, or
• retired or,
 resigned from, or otherwise left school employment
because of allegations of misconduct or while allegations of misconduct were pending?
Yes No
b. Have you ever been convicted of any felony or misdemeanor in California or any other place? You must disclose:
all criminal convictions
 misdemeanors and felonies
 convictions based on a plea of no contest or nolo contendere
 convictions dismissed pursuant to Penal Code Section 1203.4
 driving under the influence (DUI) or reckless driving convictions
 no matter how much time has passed
You do not have to disclose:
 misdemeanor marijuana-related convictions that occurred more than two years prior to this application, except convictions involving concentrated cannabis, which must be disclosed regardless of the date of such a conviction.
• Infractions (DUI or reckless driving convictions are <u>not</u> infractions)
Yes No
c. Are you currently the subject of any inquiry or investigation by any law enforcement agency or any licensing agency in California or any other state?
Yes No
T es v ivo
d. Are any criminal charges currently pending against you?
Yes No

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e.	Have you ever had any credential, including but not limited to, any Certificate of Clearance, permit, credential, license or other document authorizing public school service, revoked, denied, suspended, publicly reproved, and/or otherwise subjected to any other disciplinary action (including an action that was stayed) in California or any other state or place? Yes
f.	Have you ever had any professional or vocational (not teaching or educational) license revoked, denied, suspended, and/or otherwise subjected to any other disciplinary action (including an action that was stayed) in California or any other state or place? Yes No

12. CHILD ABUSE AND NEGLECT MANDATED REPORTING (to be answered by the applicant) As a document holder authorized to work with children, it is part of my professional and ethical duty to report every instance of child abuse or neglect known or suspected to have occurred to a child with whom I have professional contact.

I understand that I must report immediately, or as soon as practicably possible, by telephone to a law enforcement agency or a child protective agency, and will send a written report and any evidence relating to the incident within 36 hours of becoming aware of the abuse or neglect of the child.

I understand that reporting the information regarding a case of possible child abuse or neglect to an employer, supervisor, school principal, school counselor, coworker, or other person is not a substitute for making a mandated report to a law enforcement agency or a child protective agency.

1 understand that the reporting duties are individual and no supervisor or administrator may impede or inhibit my reporting duties.

I understand that once I submit a report, I am not required to disclose my identity to my employer.

I understand that my failure to report an instance of suspected child abuse or neglect as required by the Child Abuse and Neglect Reporting Act under Section 11166 of the Penal Code is a misdemeanor punishable by up to six months in jail or by a fine of one thousand dollars (\$1,000), or by both that imprisonment and fine.

I acknowledge and certify that as a document holder, I will fulfill all the duties required of a mandated reporter.

	X	I agree
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13. PU	IBLIC NOTICE CHECK THE BOX THAT APPLIES
	Public School District: Attached is a copy of the agenda item presented to the governing board of the school district in a public meeting showing the name of the applicant, the specific assignment including subject and grade level, and the fact that employment will be on the basis of a credential waiver. With the signature of the superintendent or his or her designee in item #14 below, the person signing verifies that the board acted upon the item favorably.
	By submitting this waiver request the district is certifying that reasonable efforts to recruit a fully prepared teacher for the assignment(s) were made in the following order:
	 A candidate who is qualified to participate in an approved internship program in the region of the school district
	 An individual who is scheduled to complete initial preparation requirements within six months
	County Office of Education, State Agency, or Nonpublic, Nonsectarian School or Agency: Attached is a dated copy of the notice that was posted at least 72 hours before the position was filled showing the name of the applicant, the specific assignment including subject and grade level, and the fact that employment will be on the basis of a credential waiver. With the signature of the superintendent or administrator or his or her designee in item #14 below, the person signing verifies that there were no objections to this waiver request.

14. APPLICANT'S CERTIFICATION

I understand that in order to receive a subsequent waiver for this assignment I must pursue the completion of requirements to obtain full certification in the subject or area covered by this waiver request as specified in #7 above.

I understand that if my case is heard in a public meeting, all materials submitted to the Commission regarding my suitability, including grades and test scores, may be discussed.

I hereby certify (or declare) under penalty of perjury under the laws of the State of California that all of the foregoing statements in this application are true and correct.

Sashahahidinejad Signature of Applicant

Date

(Sign full legal name as listed in #2)

15. EMPLOYING AGENCY CERTIFICATION (To be signed by district or county superintendent, personnel administrator, NPS/NPA administrator, or designee.)

The person for whom this waiver is requested will not be employed until he or she has been cleared by the Department of Justice under the provisions of Education Code Section 44332.6 and Section 44830.1 (AB1612). The employer acknowledges that the Commission's final approval of this individual's waiver will be determined by a fitness review covering, in part, criminal activity, including certain in-state and/or out-of-state convictions. If this waiver request is for service to special education children, the Special Education Local Planning Area (SELPA) has been notified of our intent to request this waiver.

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I certify under penalty of perjury that the information provided in this report is accurate and complete.		
Signature:		
Title:		
Date:		

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