



## RECOMMENDATION FOR THE CERTIFICATE OF COMPLETION OF STAFF DEVELOPMENT

**NAME OF RECOMMENDING DISTRICT, COUNTY, IHE OR AGENCY:**

CDS Code (if applicable): \_\_\_\_\_

*This is to certify that the individual identified below has completed Commission-approved staff development or coursework through this agency as indicated below.*

### APPLICANT INFORMATION:

Name

First	Middle	Last

Social Security Number

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### CHECK ONE:

The applicant has completed 45 clock hours of staff development with one of the approved program providers listed below.

The applicant has completed 3 semester units (or 4 quarter units) of approved course work in methods of providing specially designed academic instruction delivered in English (SDAIE). The course must meet the SDAIE requirement as part of the college or university's Commission-approved CTCL program. Submission of official transcripts to verify course completion is required.

### AUTHORIZED SIGNATURE:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

### COMMISSION-APPROVED STAFF DEVELOPMENT AGENCIES

#### Contact Person

#### Placer County Office of Education (online program)

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#### San Joaquin County Office of Education

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#### UC-Riverside, Extension (online program)

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