SAN DIEGO UNIFIED SCHOOL DISTRICT

Date: September 1, 2016

To: Elementary and Secondary School Principals

Subject: GIFTED AND TALENTED EDUCATION TEACHER CERTIFICATION APPLICATION

Department and/or Persons Concerned: Elementary and Secondary Teachers Requesting Gifted and Talented Education (GATE) Certification

Due Date: September 21, 2016

Reference: California Code of Regulations Title 5, 3831, Article 7

Action Requested: Announce to faculty and post circular. Duplicate applications (Attachment 1) for interested candidates for Fall Semester.

Brief Explanation:

California Code of Regulations Title 5, 3831, Article 7 stipulates that all elementary and secondary teachers with a major assignment in the area of gifted education must demonstrate knowledge of appropriate characteristics and skills in this field.

San Diego Unified School District requires GATE certification for all GATE Seminar and GATE Cluster teachers. Any teacher with an assignment that requires certification must either hold a GATE certificate, have a waiver (see Attachment 2) on file at the GATE Office and/or have a current application for a certification class on file when he/she begins the assignment. Teachers receive GATE certification by complying with one of the following: a San Diego Unified School District GATE certificate, a graduate certificate in gifted education from an accredited university, or a master’s degree in gifted education. Teachers who have earned a graduate certification in gifted education from an accredited university or a master’s degree in gifted education must submit the course description and a copy of the certificate or a copy of their master’s degree to the GATE Office.

GATE certification for the 2016-2017 school year will first be available to any teachers who needs to complete their GATE certification. If there is space available, any qualified teacher may enroll in either Semester 1-Tier I classes or Semester 2-Tier I classes. Over the two semesters, each major section will be limited to 80 participants. Priority enrollment will be given to teachers assigned to a GATE class. Teachers who have not been previously GATE certified will have first priority.

Please register for GATE certification classes on SDUSD ERO website. Attendance at the initial face to face class at Ballard Center and a check for the $200.00 fee are required. Site funds may be used to pay the $200.00 fee. The Expense/Budget Transfer Form is attached (Attachment 3).

Questions about the GATE certification process may be directed to the GATE Office at 858-203-4809.
Sessions scheduled for 2016-2017

Fall semester date:

Tier I – This class will be conducted predominantly online. There will be one mandatory face-to-face class in conjunction with the online classes. The class will meet at Ballard Center Auditorium on Monday, September 26, from 4:00 – 5:00 p.m.

Spring semester date:

Tier 1 – This class will be conducted predominantly online. There will be one mandatory face-to-face class in conjunction with the online classes. The class will meet at Ballard Center Auditorium on Wednesday, February 1, from 4:00 – 5:00 p.m.

Professional Activities: In order to complete GATE Teacher Certification, attendance at a GATE or related conference (e.g., ASDEG-Assocation of San Diego Educators of the Gifted, CAG-California Association for the Gifted, etc.). Distinguished Lecture Series or other GATE professional development totaling 6 hours is required.

Each applicant must register for the face-to-face class on ERO.

Teachers accepted for GATE certification classes also have the opportunity for salary advancement. Applicants pay $75.00 for three (3) units of SDUSD salary advancement credit.

APPROVED:

Jim Solo
Executive Director
Office of Leadership and Learning

Attachments (3)

Distribution: Lists A, D, E, and F
# 2016-17 GATE Certification Tier 1 – Fall Session

## REGISTRATION

### Personal Information

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<th>Name:</th>
<th>Employee ID:</th>
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<td>City:</td>
<td>State: CA</td>
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<td>Phone:</td>
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<td>Email Address:</td>
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I understand that to become GATE certified in the San Diego Unified School District, I must complete the following:

1. Take and pass the SDSU GATE Certification Tier 1 Course.
2. Complete 6 hours of supplemental professional development in addition to the course. The GATE Office will announce GATE Professional Development opportunities through SDUSD Newsline, the GATE Website, Staff Portal, and ERO.
3. Apply for District GATE Certification by May 19, 2017, by emailing the following to: criticalthinking@mail.sdsu.edu:
   - Application for Board of Education Approval of GATE Certification.
   - Proof of attendance of supplemental GATE professional development activities

The course fee is $200.00. Checks should be made payable to San Diego Unified School District (SDUSD)/GATE.

_________________________    ____________________
Signature                          Date
**WAIVER FOR NON-CERTIFIED TEACHER(S)**

It is my understanding that the teacher(s) listed below are presently not certified to instruct GATE classes. I am requesting a waiver for the teacher(s) below with the understanding they will enroll in and complete a GATE certification class.

<table>
<thead>
<tr>
<th>TEACHER ID#</th>
<th>TEACHER NAME</th>
<th>SUBJECT/COURSE NO.</th>
<th>SUBJECT/COURSE NAME</th>
<th># OF PERIODS (SECONDARY ONLY)</th>
<th>REASON FOR WAIVER</th>
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**I understand that this waive is only valid for the current school year.** I will work with the teacher(s) to ensure that certification will be completed as soon as possible.

__________________________________________  ____________________________  
Site Name                                      Site Administrator’s Signature  Date

I understand this waiver is only valid for the current school year and will apply for the next session of certification training as soon as possible. I also understand that if I do not comply with the guidelines for GATE teachers, my administrator can be asked to move me to another class/section that is not designated GATE.

__________________________________________  
Teacher’s Signature  Date

__________________________________________  
Teacher’s Signature  Date

__________________________________________  
Teacher’s Signature  Date

**GATE OFFICE USE ONLY – DO NO WRITE BELOW THIS LINE**

Date Received: ___________________________  Approved: _________  Not Approved: _______

Reason for no approval: ________________________________________________________________

__________________________________________  
GATE Program Office  Date
Budget/Expense Transfer Request
FY 2016-2017

School: ____________________________ Date: ____________

Type of Transfer: Budget

Reason for Transfer: Please transfer the amount as listed below to pay for GATE Certification course.

I authorize the Budget Department to transfer expenditures/budgets as listed above. I certify these expenditures/budgets are appropriate to transfer into the resources listed.

Required Signature:

___________________________________________
Principal’s Signature

From:

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<th>BdRf</th>
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Return this form to

April Dorman
adorman@sandi.net

or mail to: GATE Office, Hawthorne Elementary School, Conference Room 2