

**COMMISSION ON TEACHER CREDENTIALING  
CREDENTIAL WAIVER REQUESTS  
FOR 2/1/2009 - 2/28/2009**

**WAIVER REQUEST GRANTED**

1	<u><b>NAME</b></u> ANNA LISSA ARABE BARCINAS <u><b>TYPE</b></u> RE-ISSUANCE <u><b>SUBJECT</b></u> Language, Speech and Hearing	<u><b>CREDENTIAL GOAL</b></u> SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>EMPLOYING AGENCY</b></u> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>CODE SECTION WAIVED</b></u> 44265.3 Program for Speech-Language Pathology Services Credential
2	<u><b>NAME</b></u> LUCIA BARRAGAN <u><b>TYPE</b></u> RE-ISSUANCE <u><b>SUBJECT</b></u> Language, Speech and Hearing	<u><b>CREDENTIAL GOAL</b></u> SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>EMPLOYING AGENCY</b></u> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>CODE SECTION WAIVED</b></u> 44265.3 Program for Speech-Language Pathology Services Credential
3	<u><b>NAME</b></u> VENUGOPAL MALLIGERE BASAVARAJA <u><b>TYPE</b></u> FIRST TIME <u><b>SUBJECT</b></u> Language, Speech and Hearing	<u><b>CREDENTIAL GOAL</b></u> SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>EMPLOYING AGENCY</b></u> SANTA CLARA COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>CODE SECTION WAIVED</b></u> 44252(b) CBEST for a Credential or Permit 44265.3 Program for Speech-Language Pathology Services Credential
5	<u><b>NAME</b></u> LAUREL BEST-LINTON <u><b>TYPE</b></u> RE-ISSUANCE <u><b>SUBJECT</b></u> Language, Speech and Hearing	<u><b>CREDENTIAL GOAL</b></u> SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>EMPLOYING AGENCY</b></u> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>CODE SECTION WAIVED</b></u> 44265.3 Program for Speech-Language Pathology Services Credential
6	<u><b>NAME</b></u> LAURA LYNN BULLOCK-LOMBARDO <u><b>TYPE</b></u> FIRST TIME <u><b>SUBJECT</b></u> Language, Speech and Hearing	<u><b>CREDENTIAL GOAL</b></u> SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>EMPLOYING AGENCY</b></u> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL	<u><b>CODE SECTION WAIVED</b></u> 44265.3 Program for Speech-Language Pathology Services Credential
7	<u><b>NAME</b></u> JENNY BUONTEMPO <u><b>TYPE</b></u> FIRST TIME	<u><b>CREDENTIAL GOAL</b></u> SINGLE SUBJECT TEACHING CREDENTIAL	<u><b>EMPLOYING AGENCY</b></u> SANTA CLARA COUNTY OFFICE OF EDUCATION SINGLE SUBJECT TEACHING CREDENTIAL	

**SUBJECT**  
Mathematics

**CODE SECTION WAIVED**  
44252(b) CBEST for a Credential  
or Permit

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8 **NAME** DENISE LEE CARRERA **EMPLOYING AGENCY** LOS ANGELES COUNTY OFFICE OF EDUCATION  
**TYPE** RE-ISSUANCE **CREDENTIAL GOAL** SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL  
**SUBJECT** Language, Speech and Hearing **CODE SECTION WAIVED**

44265.3 Program for  
Speech-Language  
Pathology Services  
Credential

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9 **NAME** GERALDINE PAGOROGON CHUMACERA **EMPLOYING AGENCY** LOS ANGELES COUNTY OFFICE OF EDUCATION  
**TYPE** RE-ISSUANCE **CREDENTIAL GOAL** SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL  
**SUBJECT** Language, Speech and Hearing **CODE SECTION WAIVED**

44265.3 Program for  
Speech-Language  
Pathology Services  
Credential

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10 **NAME** ROEL CANLAS CORTEZ **EMPLOYING AGENCY** LOS ANGELES COUNTY OFFICE OF EDUCATION  
**TYPE** RE-ISSUANCE **CREDENTIAL GOAL** SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL  
**SUBJECT** Language, Speech and Hearing **CODE SECTION WAIVED**

44265.3 Program for  
Speech-Language  
Pathology Services  
Credential

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11 **NAME** ANNA LORRAINE VIRINA DE GOROSTIZA **EMPLOYING AGENCY** LOS ANGELES COUNTY OFFICE OF EDUCATION  
**TYPE** RE-ISSUANCE **CREDENTIAL GOAL** SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL  
**SUBJECT** Language, Speech and Hearing **CODE SECTION WAIVED**

44265.3 Program for  
Speech-Language  
Pathology Services  
Credential

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12 **NAME** ANITA FINAN **EMPLOYING AGENCY** LOS ANGELES COUNTY OFFICE OF EDUCATION  
**TYPE** RE-ISSUANCE **CREDENTIAL GOAL** SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL  
**SUBJECT** Language, Speech and Hearing **CODE SECTION WAIVED**

44265.3 Program for  
Speech-Language  
Pathology Services  
Credential

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13 **NAME** KRISTY ELIZABETH FLYNN **EMPLOYING AGENCY** MONTEREY COUNTY OFFICE OF EDUCATION  
**TYPE** FIRST TIME **CREDENTIAL GOAL** SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL  
**SUBJECT** Language, Speech and Hearing **CODE SECTION WAIVED**

44265.3 Program for  
Speech-Language  
Pathology Services  
Credential

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14 **NAME** TAYECH GEBI **EMPLOYING AGENCY** LOS ANGELES COUNTY OFFICE OF EDUCATION  
**TYPE** FIRST TIME **CREDENTIAL GOAL** SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL

	<b><u>SUBJECT</u></b> Language, Speech and Hearing		<b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
15	<b><u>NAME</u></b> KRISTYNE L. HETZER <b><u>TYPE</u></b> FIRST TIME <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
16	<b><u>NAME</u></b> MEGAN HOPPER <b><u>TYPE</u></b> RE-ISSUANCE <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
17	<b><u>NAME</u></b> BETH HOWSON <b><u>TYPE</u></b> FIRST TIME <b><u>SUBJECT</u></b> Health Science	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> MENDOCINO COUNTY OFFICE OF EDUCATION SINGLE SUBJECT TEACHING CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44252(b) CBEST for a Credential or Permit
18	<b><u>NAME</u></b> DANIEL LAMAS, JR. <b><u>TYPE</u></b> FIRST TIME <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> IMPERIAL COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
19	<b><u>NAME</u></b> JEANINE MONIQUE LAMBERT <b><u>TYPE</u></b> RE-ISSUANCE <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
20	<b><u>NAME</u></b> MICHELLE LEE <b><u>TYPE</u></b> FIRST TIME <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
21	<b><u>NAME</u></b> TRINA LISA LEE <b><u>TYPE</u></b> NEW CREDENTIAL TYPE <b><u>SUBJECT</u></b>	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL

	<b><u>SUBJECT</u></b> Language, Speech and Hearing		<b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
<b>22</b>	<b><u>NAME</u></b> JENNIFER ANNE LITTLE <b><u>TYPE</u></b> FIRST TIME <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> STANISLAUS COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
<b>23</b>	<b><u>NAME</u></b> ALBERT LITVIN <b><u>TYPE</u></b> FIRST TIME <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44252(b) CBEST for a Credential or Permit 44265.3 Program for Speech-Language Pathology Services Credential
<b>25</b>	<b><u>NAME</u></b> SARAH JOY LUPO <b><u>TYPE</u></b> RE-ISSUANCE <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
<b>26</b>	<b><u>NAME</u></b> MELISSA SUE MENJIVAR <b><u>TYPE</u></b> RE-ISSUANCE <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
<b>27</b>	<b><u>NAME</u></b> FATIMA COMIDA MORANTE <b><u>TYPE</u></b> RE-ISSUANCE <b><u>SUBJECT</u></b> Language, Speech and Hearing	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential
<b>28</b>	<b><u>NAME</u></b> NAOMI OKADA <b><u>TYPE</u></b> FIRST TIME <b><u>SUBJECT</u></b> Driver Education and Driver Training	<b><u>CREDENTIAL GOAL</u></b>	<b><u>EMPLOYING AGENCY</u></b> SAN FRANCISCO COUNTY OFFICE OF EDUCATION DESIGNATED SUBJECTS SPECIAL SUBJECTS TEACHING CREDENTIAL <b><u>CODE SECTION WAIVED</u></b> 44260.4 Course Work Requirements for a Designated Subjects Credential in Driver's Education and Training

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<b>29</b>	<b><u>NAME</u></b> SHERRY RENEE ORTEGA		<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> RE-ISSUANCE	<b><u>CREDENTIAL GOAL</u></b>	SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL
	<b><u>SUBJECT</u></b> Language, Speech and Hearing		<b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential

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<b>30</b>	<b><u>NAME</u></b> JOHN RICHARD ROSCOE		<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> RE-ISSUANCE	<b><u>CREDENTIAL GOAL</u></b>	SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL
	<b><u>SUBJECT</u></b> Language, Speech and Hearing		<b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential

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<b>31</b>	<b><u>NAME</u></b> LA JANNELLE SMITH		<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> FIRST TIME	<b><u>CREDENTIAL GOAL</u></b>	SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL
	<b><u>SUBJECT</u></b> Language, Speech and Hearing		<b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential

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<b>32</b>	<b><u>NAME</u></b> CHRISTINE E. UNDERWOOD		<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> RE-ISSUANCE	<b><u>CREDENTIAL GOAL</u></b>	SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL
	<b><u>SUBJECT</u></b> Language, Speech and Hearing		<b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential

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<b>33</b>	<b><u>NAME</u></b> DEBORAH A. WALKER		<b><u>EMPLOYING AGENCY</u></b> KERN COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> RE-ISSUANCE	<b><u>CREDENTIAL GOAL</u></b>	SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL
	<b><u>SUBJECT</u></b> Language, Speech and Hearing		<b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential

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<b>34</b>	<b><u>NAME</u></b> KAITLIN F. WILSON		<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> RE-ISSUANCE	<b><u>CREDENTIAL GOAL</u></b>	SPEECH-LANGUAGE PATHOLOGY SERVICES CREDENTIAL
	<b><u>SUBJECT</u></b> Language, Speech and Hearing		<b><u>CODE SECTION WAIVED</u></b> 44265.3 Program for Speech-Language Pathology Services Credential

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<b>35</b>	<b><u>NAME</u></b> LINDA HELENE ZOLONZ		<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> NEW CREDENTIAL TYPE	<b><u>CREDENTIAL GOAL</u></b>	EDUCATION SPECIALIST INSTRUCTION CREDENTIAL
	<b><u>SUBJECT</u></b> Early Childhood Special Education		<b><u>CODE SECTION WAIVED</u></b> 44265 Professional Preparation Program for a Specialist Credential in Special Education, Reading, etc.

# WAIVER REQUEST DENIED

36	<b><u>NAME</u></b> ALINE GRISALES		<b><u>EMPLOYING AGENCY</u></b> SANTA CLARA COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> FIRST TIME	<b><u>CREDENTIAL GOAL</u></b>	BILINGUAL, CROSSCULTURAL, LANGUAGE AND ACADEMIC DEVELOPM
	<b><u>SUBJECT</u></b> Spanish		<b><u>CODE SECTION WAIVED</u></b> 44253.3 Certificate or Credential to Provide Instruction to Limited English Proficient (LEP) Students
37	<b><u>NAME</u></b> PATRICK J MC FARLAND		<b><u>EMPLOYING AGENCY</u></b> LOS ANGELES COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> RE-ISSUANCE	<b><u>CREDENTIAL GOAL</u></b>	EDUCATION SPECIALIST INSTRUCTION CREDENTIAL
	<b><u>SUBJECT</u></b> Mild/Moderate Disabilities		<b><u>CODE SECTION WAIVED</u></b> 44252(b) CBEST for a Credential or Permit
39	<b><u>NAME</u></b> JENNIFER JAIME MITCHELL		<b><u>EMPLOYING AGENCY</u></b> KERN COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> FIRST TIME	<b><u>CREDENTIAL GOAL</u></b>	EDUCATION SPECIALIST INSTRUCTION CREDENTIAL
	<b><u>SUBJECT</u></b> Mild/Moderate Disabilities		<b><u>CODE SECTION WAIVED</u></b> 80021.1 Requirements for the Initial Issuance of a Provisional Internship Permit
40	<b><u>NAME</u></b> GEINAH NIERRA		<b><u>EMPLOYING AGENCY</u></b> SAN BERNARDINO COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> FIRST TIME	<b><u>CREDENTIAL GOAL</u></b>	EDUCATION SPECIALIST INSTRUCTION CREDENTIAL
	<b><u>SUBJECT</u></b> Mild/Moderate Disabilities		<b><u>CODE SECTION WAIVED</u></b> 44252(b) CBEST for a Credential or Permit 44265 Professional Preparation Program for a Specialist Credential in Special Education, Reading, etc.
42	<b><u>NAME</u></b> AMANDA LYNN PETERSEN		<b><u>EMPLOYING AGENCY</u></b> SAN FRANCISCO COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> FIRST TIME	<b><u>CREDENTIAL GOAL</u></b>	SINGLE SUBJECT TEACHING CREDENTIAL
	<b><u>SUBJECT</u></b> Mathematics		<b><u>CODE SECTION WAIVED</u></b> 80021.1 Requirements for the Initial Issuance of a Provisional Internship Permit
43	<b><u>NAME</u></b> SHAUNA MARIE SIMS		<b><u>EMPLOYING AGENCY</u></b> ORANGE COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> FIRST TIME	<b><u>CREDENTIAL GOAL</u></b>	EDUCATION SPECIALIST INSTRUCTION CREDENTIAL
	<b><u>SUBJECT</u></b> Mild/Moderate Disabilities		<b><u>CODE SECTION WAIVED</u></b> 80021.1 Requirements for the Initial Issuance of a Provisional Internship Permit
44	<b><u>NAME</u></b> KAREN VAN WAGENEN		<b><u>EMPLOYING AGENCY</u></b> KERN COUNTY OFFICE OF EDUCATION
	<b><u>TYPE</u></b> RE-ISSUANCE	<b><u>CREDENTIAL GOAL</u></b>	SINGLE SUBJECT TEACHING CREDENTIAL

**SUBJECT**  
English

**CODE SECTION WAIVED**  
80021.1 Requirements for the  
Initial Issuance of a  
Provisional Internship  
Permit