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Information

Educator Preparation Committee

Update on the AB 1119 Implementation Plan: Dual Credentialing

Executive Summary: This agenda item provides an update on implementation of Assembly Bill 1119 (Patel), which requires the Commission, by March 1, 2027, with input from the education field, to develop and establish efficient routes to dual credentialing across general education and special education. This item describes the structure and approach staff are using to carry out this work and the activities currently underway. This item does not propose specific policy changes or regulatory language at this time. This document summarizes field input gathered to date through separate surveys of educators and program sponsors and a series of listening sessions and interviews.

Recommended Action: For information only

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Strategic Plan Goal

Educator Preparation and Advancement

- **Goal 2.** Prospective educators have multiple pathways to explore and access careers in education and advance in the profession.
- **Goal 3.** California's educators reflect the diversity of the students they serve.
 - D. Increase accessibility of the credentialing process by eliminating unnecessary barriers for prospective educators
 - E. Provide clear information and guidance about how to enter and advance in the education profession

Update on the AB 1119 Implementation Plan: Dual Credentialing

Introduction

Assembly Bill 1119 (Patel) requires the Commission on Teacher Credentialing (Commission), with input from the education field, to develop and establish efficient routes to dual credentialing across general education and special education through the regulatory process by March 1, 2027. In doing so, the bill directs the Commission to examine current pathways through which candidates and credential holders may add an authorization, identify areas of overlap in preparation, consider options such as supplementary authorizations, assess barriers and opportunities affecting candidates and preparation programs, review approaches used in other states, and determine whether statutory changes may be needed.

Background

California's credentialing system includes multiple pathways and authorization types that allow candidates to earn initial credentials and practicing educators to add credentials over time. Preparation programs reflect this structure, with different entry points, program models, and sequences of coursework and clinical practice. Recent reforms have also introduced greater alignment across credential areas, including shared or foundational preparation experiences.

Even with those developments, pathways to additional credentials continue to vary in structure, sequencing, and expectations. Candidates and practicing educators may encounter differences in coursework, clinical practice, and assessment requirements depending on the credential held, the credential sought, and the preparation model through which they are moving. These differences shape how programs are designed and experienced and can affect the time, cost, and clarity of progression for candidates.

Assembly Bill 1119 reflects the Legislature and Commission's shared interest in improving access to dual credentialing as part of broader efforts to support inclusive practice and better prepare educators to serve students with and without disabilities. That interest is consistent with broader work on inclusive educational environments, including the Thompson Policy Institute on Disability's recent report, "Creating Inclusive Educational Environments for Students With and Without Disabilities." The bill builds on recent Commission-led reforms that established a common trunk of preparation across general and special education credential areas, creating an opportunity to examine where preparation may be aligned more efficiently while maintaining rigor. The General Education TPEs, also referred to as the universal TPEs, are the foundation for the common trunk of preparation. The bill also responds to ongoing workforce needs in special education and the role that preparation pathways may play in supporting a more stable and prepared workforce.

Since the April 2026 Commission meeting, the Focused Policy Review Team has continued meeting monthly and engaged in field inquiry. The team reviewed and discussed educator and

program sponsor survey results, listening sessions and 1:1 interview feedback. The findings are the basis for this agenda item.

Evolution of the Current General Education and Education Specialist Credential Structure

The Commission began the work of transforming general education teacher preparation in the fall of 2014 and adopted general education program standards in December 2015 and general education Teaching Performance Expectations (TPEs) in June 2016. The impetus for this work were the calls for action by the [Educator Excellence Taskforce](#), the [Teacher Preparation Advisory Panel](#) and the [Statewide Special Education Task Force](#). All general education teacher preparation programs began full implementation of the revised standards that include enhanced preparation to teach a diverse range of students including those with disabilities in the fall of 2017.

With the adoption of the general education or universal TPEs in 2016, reference is made to "all students" or "all TK-12 students." This phrase is intended as a widely inclusive term that references all students attending public schools. Students may exhibit a wide range of learning and behavioral characteristics, as well as disabilities, dyslexia, intellectual or academic advancement, and differences based on ethnicity, race, socioeconomic status, gender, gender identity, sexual orientation, language, religion, and/or geographic origin. The range of students in California public schools also includes students whose first language is English, English learners, and Standard English learners. This definition also carries through to the Education Specialist TPEs in an effort to emphasize that teachers need to be prepared to work with a variety of learners in their career as an educator.

The Preliminary and Clear Education Specialist Instruction Credentials are the current special education credentials issued by the Commission. The Education Specialist Credential along with the associated specialty areas were initially established in 1997 but underwent additional revisions in 2010 and most recently in 2018. At that time, the Commission approved a new Education Specialist credential structure, reducing the number of preliminary credentials from seven to five. Teaching Performance Expectations (TPE) for each of the five preliminary Education Specialist credential areas: Mild to Moderate Support Needs (MMSN), Extensive Support Needs (ESN), Early Childhood Special Education (ECSE), Deaf and Hard of Hearing (DHH), and Visual Impairments (VI) were also adopted. The new Education Specialist program standards focus on what programs must offer to candidates including clearly defined expectations for clinical practice, while the TPEs define the knowledge and skills each candidate must have prior to recommendation for the preliminary teaching credential. Candidates in MMSN and ESN programs also need to show mastery of the universal TPEs, currently used in the Multiple and Single Subject credential programs.

The Education Specialist program standards define the expectations for content and pedagogy that must be provided to candidates including learning about, practicing and demonstrating the Teaching Performance Expectations unique to each Education Specialist credential, and set forth the requirements for field experiences that candidates must complete. In addition, the standards outline the program's responsibility for implementing a teaching performance assessment. One significant change for all Education Specialist credential programs is the

requirement that candidates take and pass a teaching performance assessment, effective the 2022-23 academic year for MMSN and ESN candidates, and effective the 2025-26 academic year for DHH, VI, and ECSE candidates.

All programs had to be aligned to the 2018 Education Specialist Teaching Credential program standards and Teaching Performance Expectations by fall 2022. The 2018 Preliminary Education Specialist Teaching Credential Program Standards and Teaching Performance Expectations are a result of the Commission's efforts to streamline and strengthen the accreditation system, including a stronger focus on program outcomes.

Taken together, these changes created greater commonality across general education and Education Specialist preparation while retaining credential-specific expectations. That structure provides the starting point for examining where current pathways may contain unnecessary duplication and where distinct preparation remains necessary.

Methodology

The inquiry record summarized in this document includes a program sponsor survey, a statewide educator survey, and a set of listening sessions and interviews with current credentialed teachers, preparation program representatives, district and county office partners, and program leaders with experience designing or implementing dual credential pathways. The program sponsor survey informed the Focused Policy Review Team's early identification of barriers, areas of redundancy, and questions for subsequent field engagement. The later educator survey and listening sessions broadened the inquiry to additional practitioner, candidate, program, and employer perspectives.

The program sponsor survey was open from March 23 through April 24, 2026, and received 77 responses. It was shared at the California Council on Teacher Education Spring Meeting, through EQ Weekly E-News during the survey window, and through targeted email to Education Specialist and general education program leadership and faculty. The survey gathered quantitative and open-ended input on current pathways, friction and redundancy, overlap in preparation, assessment and demonstration of competence, pathway structure and sequencing, and priorities for improving dual credentialing. Seventy-five respondents completed the fixed-choice items summarized in [Appendix B](#).

Four hundred twenty-six educators responded to the educator survey. Respondents included Education Specialists, Multiple/Single subject credential holders, current candidates and administrators. Forty-three percent of respondents reported 0-3 years employed in California schools as an educator, 16% 4-8 years, 12% 9-13 years, and 29% 14 or more years. (See [Appendix A](#)) The survey gathered quantitative and open-ended input on interest in earning an additional credential, barriers to dual credentialing, availability of dual credential pathways, policy priorities, and willingness to provide further input. Quantitative survey responses were summarized using counts and percentages. Open-ended responses were reviewed thematically to identify recurring barriers, suggested efficiencies, concerns, and potential incentives.

Listening-session and interview notes were reviewed to identify recurring themes across stakeholder groups and implementation contexts. The analysis focused on areas of convergence, tension, and design relevance, including coursework alignment, clinical practice, assessment, mentor capacity, pathway clarity, cost, program sustainability, assignment concerns, and preparation quality. The listening-session results are organized by theme in [Appendix C](#) and are used in Section 3 to support the draft findings and related design implications.

Findings were developed where one or more of the following conditions were present: direct quantitative support from survey responses; recurring qualitative themes across survey responses, listening-session sources, or interviews; convergence across multiple sources; or a design implication that followed from multiple strands of the inquiry record. Where a finding is based primarily on qualitative input or cross-source synthesis, the finding is framed accordingly.

The findings do not rest on the same kind or strength of evidence. Findings 1 through 4 draws on the strongest convergence in the inquiry record, although the contribution of each source differs by finding. Findings 5 through 7 are supported primarily by qualitative input, with survey results providing related context or corroboration. Finding 8 is a cross-cutting finding drawn from the full inquiry record and from the candidate groups identified in AB 1119.

Several limitations should be noted. Both surveys were voluntary and should not be interpreted as statistically representative of California educators or the statewide population of preparation programs and program personnel. The surveys were administered separately to different audiences and used different instruments; their results are therefore reported separately rather than combined. Listening sessions and interviews were qualitative in nature and were intended to identify recurring issues, implementation considerations, and areas for further inquiry rather than to quantify prevalence. The findings therefore reflect patterns, convergence, and tensions across the inquiry record. They are intended to support panel deliberation about what the record reasonably supports, what requires additional inquiry, and what should inform the next phase of design.

The findings below synthesize this record around the issues most relevant to route design, including pathway access, cumulative candidate burden, duplication, clinical practice, implementation capacity, existing program models, employment implications, and differences among candidate groups.

Draft Findings

Finding 1: Survey and listening-session input indicate substantial interest in dual credential pathways and uneven awareness of available options.

Evidence

The educator survey results provide direct evidence of interest in dual credentialing when the opportunity is available during preliminary preparation. Of the 426 survey respondents, 259 respondents, or 60.8 percent, indicated that they would have considered earning both a

general education credential and an Education Specialist credential at the same time if their preliminary preparation program had offered a dual credential pathway. Of these 259, 71% of Education Specialists reported interest in a dual pathway, and 21% of multiple/single credential holders reported interest. This level of interest is significant because it suggests that pathway timing and structure may matter. A dual credential option embedded in preliminary preparation may be perceived differently than a later add-on route that requires an educator to return for additional coursework, clinical practice, assessment, and cost after entering the workforce. ([Appendix A](#), Survey Results)

The educator survey also indicates uneven access and awareness. Only 66 respondents, or 15.5 percent, reported that their preliminary program offered a dual credential pathway. Another 213 respondents, or 50.0 percent, reported that their program did not offer such a pathway, while 147 respondents, or 34.5 percent, were unsure. The “unsure” response is analytically important. It suggests that the issue is not limited to whether dual credential pathways exist. It also concerns whether candidates and educators can identify them, understand them, and plan for them early enough to participate. ([Appendix A](#), Survey Results)

The program sponsor survey provides related evidence about pathway clarity. Only 29.3 percent of respondents agreed or strongly agreed that current pathways to dual credentialing are clear to candidates, while 36.0 percent disagreed or strongly disagreed and 34.7 percent were neutral. Forty-four percent disagreed or strongly disagreed that candidates are able to navigate pathways to dual credentialing without significant difficulty. ([Appendix B](#), Program Sponsor Survey Results)

Listening-session input provides additional context for this pattern. Program sponsors and district partners described dual credential pathways as dependent on early advising, clear sequencing, and candidate understanding of credential options before key coursework and clinical practice decisions are made. Listening-session participants also raised issues of terminology and communication, including the need to help candidates understand Education Specialist credential options, pathway requirements, timelines, and employment implications. ([Appendix C](#), Theme 5: Pathway Clarity, Advising, and Candidate Recruitment)

Interpretation

This finding is supported by convergence across the educator survey, program sponsor survey, and listening-session input. The educator survey establishes substantial interest in simultaneous dual credentialing, limited reported availability, and substantial uncertainty about whether pathways exist. The program sponsor survey provides related evidence about program sponsors’ perceptions of pathway clarity and candidate navigability. The listening-session record explains why the pattern matters for implementation by identifying advising, terminology, sequencing, and communication as conditions that shape candidate access. The finding should not be read as a statistical measure of statewide demand. It is better understood as evidence of meaningful field interest and a design problem related to pathway visibility and navigability. According to the recent CAIS report, 21 institutions offer dual credential programs. Currently, CTC does not accredit dual credential pathways. If an institution is approved to offer

both a Multiple/Single Subject and Education Specialist credential program, then they can offer a dual pathway.

Implications

This finding suggests that route development should address pathway visibility and navigability, not only regulatory authorization. Candidates may need earlier advising, clearer terminology, and more consistent information about available pathways. Programs and LEAs may also need clearer guidance about allowable dual credential structures, when candidates should enter a pathway, how options should be communicated, and how candidates can understand costs, timelines, clinical practice expectations, assessment requirements, and credential outcomes before committing to a route.

Finding 2: Respondents and participants identified multiple barriers that may compound the workload concern of earning an additional credential.

Evidence

The educator survey results indicate that barriers to dual credentialing are distributed across multiple parts of the preparation experience. Respondents most frequently identified the cost of tuition, which was selected by 347 respondents, or 81.5 percent. Additional clinical practice was selected by 262 respondents, or 61.5 percent. Additional coursework was selected by 214 respondents, or 50.2 percent. Additional assessments were selected by 168 respondents, or 39.4 percent. The distribution of responses does not point to a single obstacle that can be resolved independently. Rather, the survey suggests that candidates may experience dual credentialing as an accumulation of added obligations. ([Appendix A](#), Survey Results)

Open-ended educator survey responses reinforce this interpretation. Respondents identified time, workload, program length, tuition and fees, financial tradeoffs, repeated requirements, and the challenge of pursuing additional preparation while employed or managing other responsibilities. These responses suggest that the perceived workload concern of dual credentialing is not only the presence of additional requirements, but the combined effect of those requirements on candidates' lives and employment. ([Appendix A](#), Survey Results)

The listening-session record helps explain how these barriers interact. Participants described how additional units can lengthen a program and increase tuition costs; how additional clinical practice can be difficult for candidates who are already employed; how assessment requirements can become especially concerning when compressed into student teaching; and how program redesign depends on mentor availability, placement capacity, faculty collaboration, and district partnership. ([Appendix C](#), Theme 2: Clinical Practice and Inclusive Placement Models; Theme 4: TPA, Assessment, and Demonstration of Competency; and Theme 6: Cost, Time, Program Length, and Sustainability)

Interpretation

This finding is supported by convergence between quantitative survey results, open-ended survey responses, and listening-session themes. The survey identifies the frequency of major barriers; the listening sessions show how those barriers interact in program design and

candidate experience. The finding is not that every candidate experiences every barrier. Rather, the inquiry record indicates that dual credentialing feasibility depends on the combined effect of cost, time, coursework, clinical practice, assessment, and employment conditions.

Implications

This finding suggests that the next phase of work should examine the total workload created by credential requirements rather than treating cost, coursework, clinical practice, assessment, and time as separate issues. A route that reduces one requirement may still be inaccessible if other requirements continue to stack. Design work should therefore consider the full candidate experience from entry through recommendation, including where requirements duplicate prior preparation, where flexibility is appropriate, and where quality safeguards remain necessary.

Finding 3: Field input supports reducing duplicative requirements while maintaining credential-specific preparation.

Evidence

The educator survey results show strong support for reducing duplication across credential pathways. In response to whether reducing duplication between credential programs should be a priority, 253 respondents, or 59.4 percent, strongly agreed and 98 respondents, or 23.0 percent, agreed. Together, 351 respondents, or 82.4 percent, agreed or strongly agreed that reducing duplication should be a priority. ([Appendix A](#), Survey Results)

At the same time, educator survey respondents strongly supported careful implementation to maintain preparation quality. On that item, 184 respondents, or 43.2 percent, strongly agreed and 158 respondents, or 37.1 percent, agreed. Together, 342 respondents, or 80.3 percent, agreed or strongly agreed that changes should be implemented carefully to maintain quality. Taken together, these survey results indicate support for efficiency, but not for reducing requirements without attention to preparation quality. ([Appendix A](#), Survey Results)

The program sponsor survey provides additional support for this finding. Sixty-five-point four percent (65.4%) of respondents agreed or strongly agreed that there is meaningful overlap in preparation across credentials that could be counted once rather than twice, and 89.3 percent agreed or strongly agreed that preparation requirements could be streamlined while maintaining rigor. Seventy-point six percent (70.6%) agreed or strongly agreed that candidates are required to demonstrate similar competencies multiple times across credentials, while 82.7 percent agreed or strongly agreed that existing assessments could be used to demonstrate competence across more than one credential. At the same time, 89.3 percent agreed or strongly agreed that changes to pathways should be implemented carefully to maintain preparation quality. ([Appendix B](#), Program Sponsor Survey Results)

Open-ended educator survey responses identified repeated coursework, repeated assessments, unclear transferability, and lack of recognition for prior preparation or experience as recurring concerns. These comments suggest that respondents may be willing to complete meaningful additional preparation but are less willing to repeat content or requirements that appear substantially similar to what they have already completed. ([Appendix A](#), Survey Results)

Listening-session participants identified concrete areas where efficiency may be possible, including shared foundational coursework, common trunk design, TPE alignment, co-taught courses, integrated literacy and math preparation, MTSS-based preparation, and clearer identification of content that can satisfy requirements for both credentials. Existing and emerging programs described different ways of integrating preparation across general education and special education, including shared courses, coordinated clinical experiences, and faculty collaboration across program areas. ([Appendix C](#), Theme 1: Coursework Redundancy and Common Trunk Design)

Listening-session input also cautioned against treating all additional preparation as duplicative. Participants emphasized that candidates still need meaningful preparation in both general education and special education. Some content and experiences may remain credential-specific because they relate to particular student populations, instructional settings, service delivery models, legal responsibilities, or professional roles. ([Appendix C](#), Theme 8: Preparation Quality and Student Impact)

Interpretation

This finding is supported by strong convergence across both surveys and listening-session input. The educator and program sponsor surveys independently show support for reducing duplication while maintaining preparation quality. The listening-session record identifies mechanisms for reducing duplication while also marking the limits of streamlining. Faculty identified a need for financial resources to bring people together to do the streamlining work, the impact on faculty teaching loads, and challenges with educator preparation residing in siloes. The finding therefore does not support a general reduction in preparation. It supports a more precise inquiry into which requirements overlap, which can be satisfied across credentials, and which remain necessary for credential-specific competence.

Implications

This finding suggests that streamlining should begin with a thoughtful analysis of duplication, not with across-the-board reductions. A common trunk or TPE crosswalk may help identify preparation content, coursework, clinical experiences, or assessments that can reasonably satisfy requirements across credentials. At the same time, the analysis should preserve preparation that remains distinct because it is tied to a credential area, student population, setting, service delivery model, or professional role.

Finding 4: Clinical practice requirements present a central design tension between feasibility and preparation quality.

Evidence

The educator survey results identify additional clinical practice as one of the most significant barriers to obtaining an additional credential. Additional clinical practice was selected by 262 respondents, or 61.5 percent, making it the second-most frequently selected barrier after tuition cost. This is a substantial finding because clinical practice is not simply another program

requirement. It is also one of the primary mechanisms by which preparation quality is assured. ([Appendix A](#), Survey Results)

Open-ended educator survey responses further raised concerns about completing additional fieldwork or student teaching while managing employment, tuition, family obligations, and other program requirements. For current credential holders, the challenge may be especially acute because they may already be working in schools and may not be able to step away from employment for a traditional placement. For preservice candidates, added clinical requirements may extend the program timeline or increase the intensity of an already demanding preparation sequence. ([Appendix A](#), Survey Results)

The listening sessions indicate why clinical practice is difficult to streamline. Participants described the need for candidates to gain meaningful experience in both general education and special education contexts, while also noting practical constraints in securing appropriate placements. Listening sessions raised questions about what qualifies as an inclusive placement, how co-teaching and push-in models should count, whether current employment can satisfy some clinical expectations, how to balance time across credential areas, and how to ensure access to qualified mentors. Several programs and partners also noted that inclusive settings, if offered at all, vary substantially across districts, school sites, and grade spans. ([Appendix C](#), Theme 2: Clinical Practice and Inclusive Placement Models)

The listening sessions also connect clinical practice to mentor capacity. Programs and district partners described difficulty identifying qualified mentors, particularly in special education, and noted that dual credential pathways may require coordination across more than one setting, mentor, or service delivery model. ([Appendix C](#), Theme 3: Mentor Capacity and Candidate Support)

Interpretation

This finding is supported across the field inquiry. The educator survey establishes clinical practice as a high-frequency barrier, while the program sponsor survey and subsequent listening sessions identify placement, mentor, employment, and inclusive-setting constraints that shape how the barrier operates in practice. The listening-session record establishes why clinical practice cannot simply be reduced without attention to the quality and range of candidate experience. Clinical practice is therefore a central design tension: it is both a feasibility challenge and critical component of preparation. The finding supports careful specification of clinical expectations rather than either wholesale reduction or unmodified continuation of existing requirements.

Implications

This finding suggests that clinical practice will require explicit design parameters. The work should clarify what clinical experiences are essential for dual credential candidates, what qualifies as an inclusive placement, how co-teaching and intervention models should count, whether current employment or prior experience can satisfy some expectations, the role of early clinical hours, duration and frequency, and how programs can ensure supervised experience in both general education and special education contexts.

Finding 5: Field input identified program and LEA implementation capacity as a condition for expanding dual credential pathways.

Evidence

The educator survey results provide context for this finding by showing that respondents identified cost, clinical practice, coursework, and assessment as substantial barriers. These barriers indicate that participation in dual credentialing depends not only on interest, but also on whether programs and LEAs can create pathways that are feasible for candidates. ([Appendix A](#), Survey Results)

The primary evidence for this finding comes from the listening-session record. Programs and partners repeatedly described implementation conditions that affect whether dual credential pathways can operate in practice. These included shortages of qualified Education Specialist mentors, difficulty securing inclusive placements, dependence on LEA partnerships, limited faculty collaboration time, and the need for advising, recruitment, and funding infrastructure. Several sessions also indicated that existing dual credential models often depend on grant funding, residency structures, mentor stipends, faculty coordination, and strong district-program relationships. ([Appendix C](#), Theme 2: Clinical Practice and Inclusive Placement Models; Theme 3: Mentor Capacity and Candidate Support; Theme 5: Pathway Clarity, Advising, and Candidate Recruitment; and Theme 6: Cost, Time, Program Length, and Sustainability)

The listening-session record also suggests that implementation conditions may not be evenly distributed across institutions, regions, or district contexts. Some models appear to be supported by strong local partnerships, residency funding, or program-specific infrastructure. Those models offer valuable examples, but they may not be immediately replicable in all settings without additional support or adaptation.

Interpretation

This finding is supported primarily by program sponsor and listening-session input. The program sponsor survey initially identified institutional alignment, mentor availability, placement capacity, and related implementation constraints, and subsequent listening sessions developed those issues across specific program and LEA contexts. It should be read as an implementation finding rather than a quantified measure of statewide capacity. The evidence indicates that authorizing efficient routes is necessary but may not be sufficient. Programs and LEAs need the operational capacity to advise candidates, align coursework, secure placements, support mentors, coordinate across institutions, and sustain pathways financially. Without those conditions, formally available routes may remain difficult to operate or scale.

Implications

This finding suggests that implementation capacity should be treated as part of pathway design. Efficient routes may require more than regulatory authorization; programs and LEAs may need mentor pipelines, placement agreements, faculty collaboration structures, advising tools, funding support, mentor training, release time, and communities of practice. The next phase of work should consider what supports or conditions may be needed for dual credential pathways

to operate beyond programs with unusually strong partnerships, residency funding, or existing clinical infrastructure.

Finding 6: Existing dual credential models provide design examples, but current approaches vary in structure, sequencing, and implementation conditions.

Evidence

The educator survey results suggest uneven availability and visibility of dual credential pathways. While 259 respondents, or 60.8 percent, reported that they would have considered a simultaneous dual credential pathway, only 66 respondents, or 15.5 percent, reported that their preliminary program offered one, and 147 respondents, or 34.5 percent, were unsure. This pattern suggests that dual credential opportunities are not yet experienced by educators as a clear or consistent statewide pathway. ([Appendix A](#), Survey Results)

The listening-session record shows that California already has a range of relevant models from which to learn. Participants described integrated pathways, stacked or sequenced pathways, residency-based pathways, common foundational coursework, co-taught courses, add-on approaches, and programs that embed both general education and special education preparation over time. These models are important because they move the conversation beyond abstract policy design. They show that dual credential preparation is already being attempted in different forms and under different local conditions. ([Appendix C](#), Theme 1: Coursework Redundancy and Common Trunk Design; Theme 2: Clinical Practice and Inclusive Placement Models; and Theme 6: Cost, Time, Program Length, and Sustainability)

At the same time, the variation across models is substantial. Programs differ in how they sequence coursework, whether they use integrated or stacked designs, how they structure clinical practice, when candidates complete assessment requirements, how they partner with districts, and how they fund candidate and mentor supports. Some models appear to rely heavily on residency funding or strong district partnerships. Others are designed as add-on or extended pathways.

Interpretation

This finding is based primarily on qualitative listening-session input, with educator survey results providing context about uneven availability and awareness. The finding does not assert that existing models are deficient. Rather, it recognizes that existing models provide useful design examples while also revealing substantial variation in structure and implementation. The design task is to learn from current practice while identifying the common expectations needed for coherence across pathways.

Implications

This finding suggests that existing models should inform statewide design parameters without becoming a single template. The work should identify where statewide consistency is needed and where program flexibility is appropriate. This may include expectations for common trunk content, clinical practice, assessment sequencing, program approval, and documentation of how both credential areas are represented.

Finding 7: Current credentialed teacher input identified post-credential assignment, workload, and educator-protection concerns when seeking a subsequent credential as an Education Specialist or Multiple/Single subject teacher.

Evidence

The educator survey results provide related context by showing interest in more efficient pathways alongside concerns about workload, preparation quality, and the practical consequences of holding an additional credential. Written educator survey responses raised issues that extend beyond preparation requirements and into how a credential may be used in employment settings. ([Appendix A](#), Survey Results)

The primary evidence for this finding comes from listening-session input from current credentialed general education and special education teachers. Participants raised concerns about potential unintended consequences after educators become dually credentialed, including unwanted assignments, multiple preparations, expanded workload, caseload implications, employer flexibility, collective bargaining impacts, and the need for guardrails. These concerns are distinct from the implementation issues raised by preparation programs. They point to the employment context in which dual credentials may operate after candidates complete preparation. ([Appendix C](#), Theme 7: Guardrails, Assignment Implications, and Educator Protections)

Interpretation

This finding is primarily supported by qualitative input from currently credentialed teachers. It should not be interpreted as general opposition to dual credentialing. Rather, it identifies a boundary between preparation-route design and post-credential use. A route can be well designed from a preparation standpoint and still raise questions about assignment practices, workload, caseloads, employer expectations, or collective bargaining contexts after the credential is issued. For that reason, assignment and workload concerns should be treated as a distinct policy consideration, not as a preparation-program issue.

Implications

This finding suggests that assignment and workload concerns should be addressed separately from preparation-route design. The work should consider whether guidance is needed to clarify what dual credentialing authorizes, what it does not require, and how assignment, workload, caseload, multiple-preparation, educator consent, and collective bargaining concerns should be understood in relation to local employment contexts.

Finding 8: The inquiry record supports consideration of differentiated routes for distinct candidate and credential-holder groups.

Evidence

The educator survey results show varied levels of interest and uncertainty across respondent groups. Among respondents asked about adding an Education Specialist credential, 103 respondents, or 24.2 percent, indicated interest, 116 respondents, or 27.2 percent, indicated they were not interested, 83 respondents, or 19.5 percent, were unsure, and 124 respondents,

or 29.1 percent, did not respond. Among respondents asked about adding a PK-3, Multiple Subject, or Single Subject credential from an Education Specialist background, 174 respondents, or 40.8 percent, indicated interest, 105 respondents, or 24.6 percent, indicated they were not interested, 56 respondents, or 13.1 percent, were unsure, and 91 respondents, or 21.4 percent, did not respond. These results suggest that interest exists in both directions, but not uniformly. They also suggest that route design should not assume a single candidate profile or a single direction of movement between credential areas. ([Appendix A](#), Survey Results)

The educator survey also points to varied barriers and starting points. Some respondents are considering an additional credential early in their preparation or career, while others are already established educators. Some respondents identified cost and time as the central issue; others raised concerns about clinical practice, assessment, preparation quality, role fit, or assignment implications. These differences matter because they affect what kind of efficiency is appropriate. For one group, efficiency may mean an integrated preliminary preparation pathway at the undergraduate or postbaccalaureate levels. For another, it may mean recognition of prior coursework, prior clinical practice, current employment, or demonstrated competency. ([Appendix A](#), Survey Results)

The listening sessions reinforce the need to think beyond a single route. Participants identified different design needs for preservice candidates, current Multiple Subject and Single Subject credential holders, current Education Specialists, residency candidates, interns, experienced educators, and candidates working in different regional or institutional contexts. A candidate earning two credentials simultaneously faces different design issues than a current teacher adding a second credential after years of service. Similarly, an integrated residency pathway may create different opportunities and constraints than an add-on route for an employed teacher. The design implication is not simply that multiple pathways may be useful; it is that the core requirements of coursework, clinical practice, assessment, advising, and competency review may need to operate differently depending on the candidate's starting point. ([Appendix C](#), Theme 1: Coursework Redundancy and Common Trunk Design; Theme 2: Clinical Practice and Inclusive Placement Models; Theme 5: Pathway Clarity, Advising, and Candidate Recruitment; and Theme 6: Cost, Time, Program Length, and Sustainability)

Interpretation

This finding is a cross-cutting synthesis drawn from the full inquiry record. It is also consistent with the structure of AB 1119, which requires attention to both teacher candidates and current credential holders. The evidence does not indicate that all candidate groups require the same route, nor does it suggest that dual credentialing should be designed as a single pathway with minor adjustments. Instead, the inquiry record suggests that a candidate's starting point changes the design problem.

Preservice candidates may benefit from integrated coursework, coordinated clinical practice, and early advising before program requirements become fixed. Current credential holders may need a route that recognizes prior coursework, prior clinical practice, current employment, and demonstrated competency while still requiring preparation in areas not previously completed. Interns and residency candidates may raise different questions about job-embedded

preparation, supervision, funding, assessment timing, and access to the full range of required clinical experiences. The central implication is that coherence under AB 1119 does not require uniformity of route design. It requires clear expectations for what must be demonstrated, paired with route structures that reflect different candidate starting points.

Implications

This finding suggests that route design should distinguish among candidate groups rather than assume one pathway model. The next phase should identify which requirements remain common across routes and which may vary based on prior preparation, employment status, and credential direction. Differentiated routes may need to account for integrated preservice preparation, add-on options for current credential holders, recognition of prior preparation or demonstrated competency, and job-embedded structures for interns and residents. Each route should remain anchored in common expectations for what candidates must know and be able to do

Related Issues for Further Inquiry

The eight findings above identify the areas in which the current inquiry record provides the strongest basis for route development. Other issues emerged through the inquiry but require additional analysis or more targeted evidence before staff can draw comparable conclusions. Many of these related issues may be incorporated into the development of action items related to the above findings. These issues should be carried forward for additional inquiry, particularly as the AB 1119 panel moves from synthesis of field input into route design and policy analysis.

1. Supplementary Authorizations

AB 1119 directs the Commission to examine whether supplementary authorizations could support efficient routes for educators to add authorization in another area. The current inquiry record identifies related concerns about cost, time, prior experience, and the feasibility of earning a full second credential, particularly for current credential holders.

Further inquiry is needed to determine whether supplementary authorizations would be an appropriate route, what content or clinical expectations they would require, or which candidate groups they would best serve. This issue should remain active in the next phase of inquiry.

2. Undergraduate and Intern Pathways

Undergraduate and intern pathways may provide additional approaches to efficient dual credentialing that warrant further examination. Integrated undergraduate pathways may allow candidates to begin general education and special education preparation together, coordinate coursework and clinical experiences earlier in the preparation sequence and avoid some of the duplication that can arise when a second credential is pursued later.

Intern pathways raise a different set of opportunities and constraints. The inquiry to date has identified challenges for intern candidates whose employment as teacher of record may not provide access to the clinical experiences required for a second credential. **Further inquiry should also examine whether an intern pathway could provide a job-embedded route for an already credentialed Education Specialist to earn a general education credential, or for a**

general education credential holder to earn an Education Specialist credential, while employed. This analysis would need to consider authorization, assignment, clinical practice, supervision, assessment, and how prior preparation should be recognized.

3. Program Approval, Standards, and Accreditation Structures

Several listening-session sources suggest that the challenge of dual credentialing is not only a local program-design issue. Current program standards, TPE organization, credential-specific expectations, and accreditation structures may make integrated preparation more difficult when requirements remain organized separately by credential area.

Further inquiry may be needed to determine whether guidance, program approval expectations, accreditation processes, or standards crosswalks should be adjusted to support coherent dual credential pathways while preserving credential-specific quality. Developing clear expectations and guidance for programs related to dual credentialing, and for teachers obtaining a subsequent credential, will help programs and candidates better understand what is required of them prior to entry into a program.

4. Recognition of Prior Preparation, Experience, and Demonstrated Competency

The findings identify the need to consider prior preparation and demonstrated competency, especially for current credential holders. Questions include how programs should evaluate prior coursework, older credentials, out-of-state or out-of-country preparation, prior clinical practice, current employment experience, National Board Certification, or other demonstrations of competency.

Further inquiry may be needed to determine specific levels of prior preparation that are valid as well as what constitutes demonstrated competency for current credential holders. While many General Education teachers have completed the common trunk of preparation (universal TPEs), the specific knowledge, skills, and abilities to be a successful Education Specialist are still needed to have a positive impact on learning for students with disabilities.

5. Role of County Offices, SELPAs, and Regional Intermediaries

The inquiry record suggests that some dual credential pathways may depend on infrastructure that individual small districts or SELPA LEAs may not be able to provide alone. County offices or other regional intermediaries may play an important role in coordinating residency grants, placements, mentor capacity, and district-program partnerships. Additional inquiry should examine whether regional infrastructure is necessary to scale dual credential pathways beyond large districts, large university partnerships, or grant-supported local models.

6. Definition of Inclusive Placement

The listening-session record repeatedly raised questions about inclusive placements, co-teaching, intervention support, split placements, and how candidates can gain meaningful experience in both general education and special education contexts, and the need for qualified mentors. Additional inquiry is needed to clarify what is considered to be an inclusive placement for dual credential preparation, how much experience candidates need in each setting, whether co-teaching or intervention models satisfy expectations, and how programs should proceed

when fully inclusive placements are not available. General education classrooms should be supportive of all students' learning needs, while some students will need additional supports from an Education Specialist. When determining inclusive placements for students with disabilities, it is important to consider where their learning needs will be best met in the Least Restrictive Environment.

7. PK-3 and Early Childhood Pathways

The educator survey and statutory framing include PK-3 and early childhood-related credentialing, but the listening-session record summarized to date is more developed around Multiple Subject, Single Subject, and Education Specialist pathways. Additional targeted inquiry may be needed to determine how PK-3 pathways should be addressed in dual credential route design, including whether PK-3 candidates or credential holders face distinct coursework, clinical practice, age-span, or assignment considerations.

8. Candidate Motivation, Recruitment, and Labor-Market Signaling

The inquiry record indicates that some candidates may be interested in dual credentialing because it provides flexibility across settings, stronger preparation for inclusive classrooms, or broader employment opportunities. However, the current record does not fully explain what motivates candidates to pursue dual credentialing, what discourages them, or how programs and LEAs should communicate the value and implications of dual credential pathways. Additional inquiry may be useful to support recruitment strategy, advising materials, and candidate-facing communication.

These issues should not be treated as separate findings at this stage. Rather, they identify areas where the current inquiry record points to potentially significant design questions that require additional evidence, legal analysis, policy development, or targeted stakeholder input. These issues will remain part of the work as staff moves into additional analysis, targeted engagement, and later phases of route and policy development.

9. Approaches in Other States

AB 1119 directs the Commission to review approaches used in other states to support dual credentialing. That review is more appropriately undertaken as staff moves from identifying the design problem to developing potential route options. As part of the next phase of work, staff will examine relevant out-of-state approaches and consider whether they offer useful models, design features, or policy considerations for California.

10. Potential Statutory Changes

AB 1119 also directs the Commission to determine whether statutory changes may be needed to support efficient routes to dual credentialing. As route options are developed, staff will assess whether identified changes can be accomplished through regulation, program standards, guidance, or existing Commission authority, and where statutory change may be necessary.

At this stage, staff is seeking Commission feedback on whether the findings and remaining areas of inquiry provide an appropriate basis for the next phase of route development.

Possible Questions for Commission Discussion

- Do the findings and interpretations accurately reflect the issues emerging from the inquiry to date?
- Which findings or areas of the inquiry would the Commission like staff to examine more deeply as route development begins?
- Are there additional considerations, perspectives, or implementation issues that should inform the next phase of work?

Staff request that the Commission review the findings and related issues identified in this item and provide direction on the considerations that should guide the next phase of route development under AB 1119. Staff will use Commission feedback to develop route and policy options for consideration at a future meeting.

Next Steps

Staff will use the findings and Commission feedback from this item to move from inquiry into route development. During September and October 2026, the Focused Policy Review Team will examine route options for different candidate and credential-holder groups, including the structure of potential pathways, areas of shared and credential-specific preparation, clinical practice, assessment, recognition of prior preparation or demonstrated competency, and implementation tradeoffs.

Staff anticipate returning to the Commission in October 2026 with proposed route and policy direction for discussion and possible action. Based on that direction, staff would develop proposed regulatory language for Commission consideration in December 2026. If additional refinement or action is needed, staff may return in February 2027 before the March 1, 2027 statutory deadline.

Appendix A

SURVEY RESULTS

A.1 Survey Overview

Total submitted responses: 426.

Percentages for fixed-choice quantitative items are based on total submitted responses (N = 426). Percentages for themed qualitative responses are based on the number of nonblank responses to the relevant open-ended item.

A.2 Respondent Profile

Current credential(s) held - major response categories

- Education Specialist: 193 (45.3%)
- Multiple Subject: 111 (26.1%)
- Enrolled in Preparation Program: 99 (23.2%)
- Single Subject: 72 (16.9%)
- Administrative Services: 53 (12.4%)
- PK-3 Early Childhood: 6 (1.4%)

Credential level currently held - primary response categories

- Intern: 183 (43.0%)
- Clear or Life: 170 (39.9%)
- Preliminary: 26 (6.1%)
- Preliminary; Clear or Life: 11 (2.6%)
- Permit: 10 (2.3%)
- Preliminary; Intern: 7 (1.6%)
- Clear or Life; Intern: 6 (1.4%)
- Intern; Permit: 4 (0.9%)
- Blank/no response: 2 (0.5%)

Grade span currently served

- Elementary (PK-5): 229 (53.8%)
- Middle School (6-8): 159 (37.3%)
- High School (9-12): 159 (37.3%)

Years employed in California public schools as an educator

- 0-3 years: 184 (43.2%)
- 4-8 years: 66 (15.5%)
- 9-13 years: 51 (12.0%)
- 14 or more years: 125 (29.3%)

Primary setting

- Special Education: 235 (55.2%)
- General Education: 164 (38.5%)
- Other responses included mixed general education/special education assignments, co-teaching or inclusion assignments, administrative or system-level roles, and specialized or alternative settings.

A.3 Interest in Additional Credentialing

Interest in adding an Education Specialist credential

Question: If you currently hold a PK-3 or Multiple/Single Subject credential, would you be interested in adding an Education Specialist credential?

- Yes: 103 (24.2%)
- No: 116 (27.2%)
- Unsure: 83 (19.5%)
- Blank/no response: 124 (29.1%)

Interest in adding a PK-3 or Multiple/Single Subject credential

Question: If you currently hold an Education Specialist credential, would you be interested in adding a PK-3 or Multiple/Single Subject credential?

- Yes: 174 (40.8%)
- No: 105 (24.6%)
- Unsure: 56 (13.1%)
- Blank/no response: 91 (21.4%)

A.4 Barriers to Obtaining an Additional Credential

Question: Which of the following do you perceive as potential barriers to obtain an additional credential?

Primary response categories (check all)

- Cost of tuition: 347 (81.5%)
- Additional time required to complete clinical practice: 262 (61.5%)
- Additional coursework: 214 (50.2%)
- Additional assessments: 168 (39.4%)

Additional written-in barriers, grouped thematically

Theme	Responses	Percent
Career stage, retirement, or lack of interest	9	17.0%
Coursework duplication, program design, assessment, or support barriers	9	17.0%
Already holds credential or no barrier identified	8	15.1%
Cost, tuition, fees, and financial tradeoffs	6	11.3%

Theme	Responses	Percent
Time, workload, and work-life balance	5	9.4%
Clinical practice, internship, and fieldwork barriers	4	7.5%
Pathway clarity, credential rules, or prior-experience recognition	4	7.5%
Preparation quality, role-fit, and assignment concerns	4	7.5%
Other or unclear responses	4	7.5%

A.5 Dual Credential Pathway Experience and Interest

Whether the preliminary credential program offered a dual pathway

Question: Did your Preliminary teaching credential program offer a dual pathway to earn both a Multiple/Single Subject and Education Specialist credential?

- Yes: 66 (15.5%)
- No: 213 (50.0%)
- Unsure: 147 (34.5%)

Whether respondent would have considered a dual pathway if available

Question: If your Preliminary credential program offered a dual pathway, would you have considered earning both a Multiple/Single Subject and Education Specialist credential?

- Yes: 259 (60.8%)
- No: 70 (16.4%)
- Unsure: 97 (22.8%)

A.6 Policy Priorities Related to Dual Credentialing

Improving efficiency

Statement: Improving efficiency in pathways to dual credentialing should be a high priority.

- Strongly Agree: 228 (53.5%)
- Agree: 118 (27.7%)
- Neutral: 68 (16.0%)
- Disagree: 6 (1.4%)
- Strongly Disagree: 6 (1.4%)

Reducing duplication

Statement: Reducing duplication across credentials should be a priority.

- Strongly Agree: 253 (59.4%)
- Agree: 98 (23.0%)
- Neutral: 61 (14.3%)
- Disagree: 9 (2.1%)
- Strongly Disagree: 5 (1.2%)

Maintaining preparation quality

Statement: Changes to pathways should be implemented carefully to maintain preparation quality.

- Strongly Agree: 184 (43.2%)
- Agree: 158 (37.1%)
- Neutral: 73 (17.1%)
- Disagree: 10 (2.3%)
- Strongly Disagree: 1 (0.2%)

A.7 Willingness to Provide Additional Input

Question: Are you willing to be contacted to provide additional input regarding dual credentialing pathways?

- Provided contact information: 205 (48.1%)
- Blank/no response: 221 (51.9%)

A.8 Open-Ended Survey Response Themes

Ideas, solutions, and/or incentives that would make the process more efficient

Nonblank responses: 290

Theme	Responses	Percent
Financial incentives and tuition support	127	43.8%
Reduce duplication and recognize overlapping coursework	46	15.9%
Recognize prior experience, demonstrated competency, or assessments	28	9.7%
Clinical practice and fieldwork flexibility	16	5.5%
Integrated, dual, or add-on credential pathways	9	3.1%
Assessment streamlining	9	3.1%
Flexible delivery models and scheduling	4	1.4%
Support, mentoring, and supervision	4	1.4%
Preparation quality and safeguards	4	1.4%
Other, unclear, no recommendation, or not applicable	42	14.5%

Opportunities to streamline requirements without reducing quality

Nonblank responses: 266

Theme	Responses	Percent
Crosswalk overlapping standards and coursework	134	50.4%
Streamline clinical practice and fieldwork	58	21.8%
Reduce duplicative assessment requirements	20	7.5%
Recognize prior preparation, experience, or demonstrated competency	13	4.9%
Build integrated dual or add-on pathways	3	1.1%
Flexible, job-embedded, or online delivery	1	0.4%
Maintain quality through safeguards, mentoring, or targeted preparation	2	0.8%
Other, unclear, no recommendation, or not applicable	35	13.2%

Final open-ended comments or considerations

Nonblank responses: 150

Themes	Responses	Percent
Credential pathway design and access	65	43.3%
Cost, compensation, and financial access	17	11.3%
Coursework duplication and credit recognition	17	11.3%
Clinical practice, internship, and fieldwork requirements	7	4.7%
Preparation quality, role fit, and student needs	6	4.0%
Time, workload, and flexible program design	3	2.0%
General support for streamlining or dual credentialing	3	2.0%
No additional comment / not applicable	15	10.0%
Other comments and considerations	17	11.3%

Appendix B

PROGRAM SPONSOR SURVEY RESULTS

B.1 Survey Overview

Total submitted responses: 77.

The program sponsor survey was open from March 23 through April 24, 2026. It was shared at the California Council on Teacher Education Spring Meeting, through EQ Weekly E-News during the survey window, and through targeted email to Education Specialist and general education program leadership and faculty.

Seventy-five respondents completed the fixed-choice items. Percentages for fixed-choice quantitative items are therefore based on N = 75. Open-ended questions received varying numbers of responses and are summarized qualitatively below.

The Focused Policy Review Team reviewed a synthesis of the program sponsor survey during Meeting 3. The synthesis informed the identification of issues for subsequent listening sessions and interviews, including pathway clarity and advising, coursework alignment and redundancy, assessment, clinical practice and placements, mentor availability, pathway sequencing, and opportunities for greater efficiency.

B.2 Current Pathways

Pathway clarity

Statement: The current pathways to dual credentialing are clear to candidates.

- Strongly Agree: 7 (9.3%)
- Agree: 15 (20.0%)
- Neutral: 26 (34.7%)
- Disagree: 20 (26.7%)
- Strongly Disagree: 7 (9.3%)

Candidate navigability

Statement: Candidates are able to navigate pathways to dual credentialing without significant difficulty.

- Strongly Agree: 4 (5.3%)
- Agree: 19 (25.3%)
- Neutral: 19 (25.3%)
- Disagree: 22 (29.3%)
- Strongly Disagree: 11 (14.7%)

B.3 Friction and Redundancy

Significant barriers

Statement: Candidates experience significant barriers when pursuing dual credentials.

- Strongly Agree: 9 (12.0%)
- Agree: 31 (41.3%)
- Neutral: 19 (25.3%)
- Disagree: 14 (18.7%)
- Strongly Disagree: 2 (2.7%)

Duplicative requirements

Statement: Requirements across credentials are unnecessarily duplicative.

- Strongly Agree: 10 (13.3%)
- Agree: 29 (38.7%)
- Neutral: 16 (21.3%)
- Disagree: 17 (22.7%)
- Strongly Disagree: 3 (4.0%)

Time to dual credentialing

Statement: The time required to become dually credentialed is longer than needed.

- Strongly Agree: 13 (17.3%)
- Agree: 19 (25.3%)
- Neutral: 24 (32.0%)
- Disagree: 15 (20.0%)
- Strongly Disagree: 4 (5.3%)

B.4 Overlap in Preparation

Meaningful overlap in preparation

Statement: There is meaningful overlap in preparation across credentials that could be counted once rather than twice.

- Strongly Agree: 20 (26.7%)
- Agree: 29 (38.7%)
- Neutral: 13 (17.3%)
- Disagree: 9 (12.0%)
- Strongly Disagree: 4 (5.3%)

Streamlining preparation while maintaining rigor

Statement: Streamlining preparation requirements could be done while maintaining rigor.

- Strongly Agree: 34 (45.3%)
- Agree: 33 (44.0%)
- Neutral: 5 (6.7%)
- Disagree: 3 (4.0%)
- Strongly Disagree: 0 (0.0%)

Necessity of current requirements

Statement: Current requirements are necessary to ensure candidates are adequately prepared.

- Strongly Agree: 10 (13.3%)
- Agree: 26 (34.7%)
- Neutral: 19 (25.3%)
- Disagree: 17 (22.7%)
- Strongly Disagree: 3 (4.0%)

B.5 Assessment and Demonstration of Competence

Repeated demonstration of competencies

Statement: Candidates are required to demonstrate similar competencies multiple times across credentials.

- Strongly Agree: 16 (21.3%)
- Agree: 37 (49.3%)
- Neutral: 11 (14.7%)
- Disagree: 11 (14.7%)
- Strongly Disagree: 0 (0.0%)

Use of existing assessments across credentials

Statement: Existing assessments could be used to demonstrate competence across more than one credential.

- Strongly Agree: 21 (28.0%)
- Agree: 41 (54.7%)
- Neutral: 9 (12.0%)
- Disagree: 3 (4.0%)
- Strongly Disagree: 1 (1.3%)

Streamlining assessment while maintaining rigor

Statement: Streamlining assessment requirements could be done without compromising rigor.

- Strongly Agree: 28 (37.3%)
- Agree: 31 (41.3%)
- Neutral: 11 (14.7%)
- Disagree: 4 (5.3%)
- Strongly Disagree: 1 (1.3%)

B.6 Pathway Structure and Sequencing

Efficiency of current pathway structure

Statement: Current pathways to dual credentialing are structured efficiently.

- Strongly Agree: 2 (2.7%)
- Agree: 22 (29.3%)
- Neutral: 27 (36.0%)
- Disagree: 18 (24.0%)
- Strongly Disagree: 6 (8.0%)

Sequencing delays

Statement: Current sequencing requirements create unnecessary delays.

- Strongly Agree: 5 (6.7%)
- Agree: 26 (34.7%)
- Neutral: 25 (33.3%)
- Disagree: 17 (22.7%)
- Strongly Disagree: 2 (2.7%)

Concurrent completion

Statement: Candidates would benefit from more opportunities to complete requirements concurrently.

- Strongly Agree: 29 (38.7%)
- Agree: 31 (41.3%)
- Neutral: 11 (14.7%)
- Disagree: 4 (5.3%)
- Strongly Disagree: 0 (0.0%)

B.7 Priorities Related to Dual Credentialing

Improving efficiency

Statement: Improving efficiency in pathways to dual credentialing should be a high priority.

- Strongly Agree: 36 (48.0%)
- Agree: 29 (38.7%)
- Neutral: 9 (12.0%)
- Disagree: 1 (1.3%)
- Strongly Disagree: 0 (0.0%)

Reducing duplication

Statement: Reducing duplication across credentials should be a priority.

- Strongly Agree: 35 (46.7%)
- Agree: 29 (38.7%)
- Neutral: 11 (14.7%)
- Disagree: 0 (0.0%)
- Strongly Disagree: 0 (0.0%)

Maintaining preparation quality

Statement: Changes to pathways should be implemented carefully to maintain preparation quality.

- Strongly Agree: 31 (41.3%)
- Agree: 36 (48.0%)
- Neutral: 6 (8.0%)
- Disagree: 1 (1.3%)
- Strongly Disagree: 1 (1.3%)

B.8 Open-Ended Survey Response Themes

Open-ended responses provided additional context for the fixed-choice results and identified several recurring implementation issues and design questions.

Pathway clarity often depends on the quality of institutional advising

Respondents repeatedly described difficulty identifying requirements and understanding how requirements apply to a particular candidate. Several noted that candidates with access to knowledgeable credential advisers can navigate the process more effectively, while candidates attempting to determine requirements independently may be confused about what applies to them. Responses also raised specific questions about clearing both credentials through induction, financial aid eligibility for concurrent programs, and how requirements apply when a candidate enters through an intern, PIP, or STSP pathway.

Clinical practice is a recurring implementation constraint

Clinical practice was one of the most concrete concerns in the responses. Program personnel described difficulty securing multiple placements, coordinating hours across general education and Education Specialist settings, identifying qualified mentors, and finding placements that allow candidates to demonstrate expectations across both credential areas. Respondents repeatedly raised particular difficulty for interns and other employed candidates because their assignment as teacher of record may not provide access to the clinical experiences required for the second credential. Responses also questioned whether additional clinical-practice requirements can be accommodated without extending the preparation sequence.

The common trunk has created overlap, but institutional structures can still lead to repeated preparation

Several respondents described candidates completing universal TPE-related preparation more than once because general education and special education coursework remains housed in separate programs or departments. Responses identified institutional history, course allocation, course-offering constraints, and limited coordination across programs as barriers to greater integration. Other respondents described programs already combining literacy, mathematics methods, behavior support, or other coursework across credential areas as examples of more integrated approaches.

Respondents distinguished between duplicated preparation and preparation that remains necessary for a second credential

The open-ended responses were not uniformly in favor of reducing requirements. Some respondents emphasized that added coursework or clinical experience remains necessary because the credentials require distinct preparation, while others questioned repeating universal TPEs, methods coursework, assessments, or clinical experiences when related preparation has already been completed. This tension appeared particularly in comments about experienced credential holders seeking an additional credential and in questions about when prior preparation should satisfy part of a second pathway.

Assessment concerns involve both repetition and the interaction between assessment and clinical practice

Respondents raised questions about whether candidates should demonstrate similar competencies through multiple assessments and whether TPA requirements could be distributed across the two credential areas. Some suggested models in which assessment is completed across both general education and special education settings. Others emphasized the workload created when assessment requirements are concentrated during intensive clinical practice. A smaller number indicated that current dual pathways already avoid some assessment duplication, suggesting that the issue may differ between simultaneous dual preparation and adding a credential later.

Intern and employed candidates face distinct clinical-practice and sequencing constraints

Respondents repeatedly questioned how an intern or other employed candidate can satisfy requirements for two credentials while serving as teacher of record in one assignment. Responses included possibilities such as co-teaching, intentionally providing experience across general education and special education settings, or structuring the pathway over a longer period. These comments indicate that clinical-practice and sequencing requirements can operate differently for employed candidates than for candidates completing traditional preservice preparation.

Program efficiency can depend on institutional capacity, not only candidate requirements

Several respondents described dual credentialing as requiring coordination across faculty, departments, clinical placement staff, and district partners. Comments identified course ownership, faculty collaboration, placement coordination, mentor availability, and financial sustainability as factors affecting whether programs can redesign pathways. Responses also suggested that shared models, crosswalks, sample course structures, and clearer Commission guidance could help programs avoid developing solutions independently.

A recurring design question was where requirements could be satisfied once rather than repeated across credentials

Across the open-ended responses, proposed efficiencies included crosswalking the common trunk, integrating coursework, recognizing prior clinical practice, allowing inclusive or co-taught placements to serve both credential areas where appropriate, and recognizing prior demonstrations of competence. At the same time, respondents raised concerns about ensuring sufficient preparation and experience in both general education and special education settings. The resulting design question is whether particular requirements represent distinct preparation or repeated demonstrations of substantially overlapping knowledge, skills, or experience.

Appendix C

LISTENING SESSION RESULTS

Appendix C summarizes the listening-session and interview record by theme. The appendix is intended to show how the draft findings and implications in Section 3 are grounded in the session notes.

Each theme includes a summary followed by cleaned source notes. The summaries synthesize recurring issues across sessions. The cleaned source notes preserve the substance of the original notes while organizing them for review. They are not verbatim transcripts. They have been lightly edited for readability but are intended to remain close enough to the session record for note-taker review and correction.

C.1 Listening Session Sources

The integrated themes draw from the listening-session and interview sources listed below.

Institution
CTA focus groups with current general and special education teachers
Alder Graduate School of Education
CSU Chico
CSU Long Beach
CSU San Marcos
CSU Stanislaus
San Diego State University
El Dorado County Office of Education
Long Beach Unified School District
Urban Dual Credential Program Coordinator listening session
UC Davis

C.2 Integrated Theme Results

Each theme section includes a summary and cleaned source notes. The summaries identify recurring patterns across the listening-session record. The cleaned source notes are organized by theme to support review of how the inquiry record informs the draft findings and design implications.

C.2.1 Coursework Redundancy and Common Trunk Design

Summary

Listening sessions repeatedly addressed how programs identify overlap between Multiple Subject/Single Subject preparation and Education Specialist preparation while preserving credential-specific content. Across sessions, participants described the need to determine which TPEs, coursework, and preparation experiences can reasonably satisfy requirements for

more than one credential, and which experiences must remain distinct because they are tied to a credential area, student population, setting, service delivery model, or professional role. This theme is central to AB 1119 because the statute directs the Commission to examine overlapping preparation content and efficient routes to dual credentialing.

The record reflects a range of current and emerging program structures. Some programs are pursuing more integrated designs in which general education and special education faculty collaborate across coursework. Other programs described stacked, sequenced, or residency-aligned designs that allow candidates to complete both credentials over time. Several sessions identified shared foundational coursework, MTSS frameworks, integrated methods, literacy and math preparation, co-taught courses, and common trunk analysis as possible strategies for reducing duplication.

At the same time, participants raised operational concerns. Integrated coursework requires faculty collaboration time, agreement about course ownership, and program-level capacity to redesign sequences. Stacked or sequenced pathways may be easier to operate within existing structures, but can increase unit load, extend time to completion, or create financial aid complications. Several sources suggested that reducing duplication should not be treated as synonymous with reducing preparation. Rather, the inquiry record supports a more precise analysis of what content can be shared, what can be credited across credentials, and what must remain credential-specific.

Cleaned Source Notes from Institutional Listening Sessions:

The institution:

- described planning an integrated Multiple Subject and mild/moderate support needs Education Specialist pilot beginning in 2027-28 with two partners, with potential cohorts of 20-40 depending on how pilots develop
- described as an integrated program rather than an add-on program and noted that special education and general education faculty would need to work together to integrate across courses
- identified possible pilot district partners; identified faculty collaboration as central to the model and raised time for faculty collaboration as a specific wish-list item
- raised the possibility of a community of practice to support universities that are trying to build dual credential pathways rather than requiring each institution to work through the design issues independently.
- raised questions about what the Commission could do to support program design, including whether an FAQ, rules, or guardrails could clarify how programs can create a compliant dual credentialing pathway.
- described an existing dual program in which candidates complete Education Specialist coursework in the fall and Multiple Subject or Single Subject coursework in the spring.

Notes from the session identified integrated methods as part of the model and also raised concerns about unit load.

- identified the challenge of ensuring that all TPEs are covered across the dual credential structure. The session also raised the possibility of add-on pathways while recognizing that required content and fieldwork still need to be addressed.
- described common foundational courses before candidates branch into credential pathways. The session also noted that faculty do not consistently talk about the common trunk and that co-teaching or integrated course design would require funding.
- raised questions about single subject pathways and how common foundational coursework, advising, and clinical infrastructure interact in the design of dual credential options.
- described a stacked dual program and identified enrollment challenges tied to the perception that the program is long. The session also raised the complexity of TPE alignment and the challenge of selling an extended or stacked pathway in a competitive provider environment.
- raised questions about how TPE complexity affects pathway design and how an add-on pathway connected to a master's program might function.
- described a four-semester Multiple Subject Credential Program plus Education Specialist structure. Notes identified the model as quasi-stacked for financial aid purposes and described current work to make coursework and clinical experiences more merged. The session also raised literacy collaboration and the need for clearer supplemental authorization information and common trunk guidance.
- described a continuing divide between general education and special education and noted the need for Education Specialists to have content expertise to be effective collaborators.
- described stacked and blended structures, joint faculty work, GLAD training, literacy faculty collaboration, and remaining overlap across preparation requirements. also emphasized the importance of intentional design so candidates do not lose either credential area in the process.
- described undergraduate pipeline work, including reducing units in Liberal Studies and creating special education and bilingual education minors to demystify credential choices and support earlier pathway decisions.
- described courses designed to meet both Multiple Subject and Education Specialist TPEs, shared foundational coursework embedded in MTSS, and co-taught courses in areas such as literacy and behavior. The notes reflect an intentional effort to structure coursework around both credential areas rather than treating one credential as an add-on to the other.
- identified MTSS and shared foundational coursework as organizing structures for preparing candidates across both general education and special education expectations.

C.2.2 Clinical Practice and Inclusive Placement Models

Summary

Clinical practice was one of the most concrete and operationally complex implementation areas across listening sessions. Participants described a core design tension: dual credential candidates need meaningful experience in both general education and special education contexts, but inclusive placements are not uniformly available across districts, sites, grade spans, or service delivery models. Several sources emphasized the need to define what counts as an inclusive setting, how co-teaching or push-in models should count, and how programs should balance time across credential areas.

The listening record reflects multiple placement models, including collaborative co-teaching, push-in/resource support, split placements, two-mentor models, and residency designs in which candidates move between general education and special education settings. Some programs are working toward fully inclusive placements where candidates can experience both credential areas in one setting. Others reported that the lack of inclusive classrooms requires dividing the clinical experience. These differences matter because the availability and quality of placements may shape whether a dual credential pathway is feasible, coherent, and sufficiently rigorous.

Clinical practice also connects directly to preparation quality. Several sources indicated that clinical practice is not simply a time requirement; it is the primary setting in which candidates practice instruction, collaboration, adaptation, behavior support, service delivery, and inclusive practices. For current credential holders, traditional additional student teaching may be difficult or infeasible if they are already employed. For preservice candidates, added clinical expectations can extend program length or intensify the preparation sequence. The record therefore supports the need for explicit clinical design parameters rather than either reducing clinical practice without safeguards or preserving existing structures without flexibility.

Cleaned Source Notes

The Institution:

- described creating a rubric for what the program wanted to see in an inclusive placement and noted that it was difficult to find those types of placements. also noted that integrated programs would need to begin as a pilot because there were not enough inclusive classrooms to handle a larger number of placements.
- referenced qualitative case study and alumni survey findings indicating that a majority of general education candidates had interacted with students with disabilities, but 60 percent of Education Specialists had not had interaction with students without disabilities. The notes linked this to the rationale for ensuring inclusive settings and cross-setting clinical experience.
- identified inclusive settings as a major design condition and raised the need for shared understanding about what an inclusive classroom is made up of. The notes also referenced the importance of whether schools are making progress on least restrictive environment and identified inclusive settings as an expectation that should remain central in the work.

- connected inclusive clinical practice to inclusive classrooms, neurodiversity, and the need for residents and mentors to share the vision of inclusive practice.
- described inclusive classrooms through an “All Means All” frame. Notes identified elementary collaborative co-teaching, secondary co-teaching, and push-in/resource support as ways dual credential candidates may encounter inclusive practice and special education service delivery in general education settings. (RU 2026)
- described collaborative co-teaching and push-in/resource support as part of the district’s inclusive service delivery approach. The notes also connected these structures to mentor availability and support needs. (RU 2026)
- emphasized equal balance in early clinical practice and student teaching across special education and general education. The notes also described variation across districts, including SDC and RSP settings as well as fully inclusive TK-2 co-teaching settings.
- identified TPA timing and balanced clinical placement as connected design issues, including whether candidates could complete one cycle in a general education setting and one in a special education setting.
- described a two-year model with 905 clinical practice hours, collaborative co-teaching classrooms, differentiated instruction, positive behavior support, curricular adaptations, and specialized academic instruction in the general education setting.
- described collaborative co-teaching classrooms and the use of SAI in the general education setting as part of the clinical model.
- noted that schools do not do enough co-teaching, inclusive classrooms are hit or miss, and candidates would benefit from being at the same site for both credentials. The notes suggest that placement quality and coherence are central to whether dual preparation feels integrated or fragmented.
- described student teaching in both settings and noted that inclusive placement challenges affect the design of a four-semester dual credential structure.
- described intentional placements with two high-quality mentors, principal involvement, and a leadership agreement to balance clinical hours across credentials. The notes reflect a placement model that depends on school leadership, mentor quality, and explicit agreement about how clinical time is distributed.
- emphasized balanced clinical experience and described district partnership as part of making the clinical model workable.
- described a residency model with two mentors and split time. noted that the split can be challenging for candidates, but that a lack of inclusive classrooms requires dividing the residency experience so candidates can meet expectations across both credential areas.
- described a one-year residency schedule and noted that the model depends on mentor availability and coordination across general education and special education placements.

C.2.3 Mentor Capacity and Candidate Support

Summary

Mentor capacity was a recurring implementation constraint across the listening sessions. Participants described shortages of qualified and willing Education Specialist mentors, the workload associated with supporting dual credential candidates, and the need for more deliberate mentor preparation and support. The record indicates that mentor capacity is not simply a logistical issue; it affects whether candidates can access appropriate placements, receive supervision across both credential areas, and demonstrate the required TPEs in the correct settings and sequence.

The listening sessions also indicate that dual credential pathways may create additional mentoring complexity. Candidates may need support from both general education and special education mentors, or from mentors working in collaborative and inclusive settings. In some models, candidates may be assigned to two mentors or split time across settings. In other models, mentors may need to understand how general education and special education expectations are integrated into a single clinical experience. These structures can increase the demands on mentors and on the systems that prepare, compensate, and coordinate them.

Participants identified possible supports for the mentor pipeline, including stipends, professional learning, recognition, release time, mentor communities of practice, clear expectations, and stronger district/program alignment. Several sessions emphasized that mentors need to understand which TPEs candidates are practicing and how mentoring responsibilities shift over the course of the pathway. Programs with strong district partnerships, concentrated placements, and dedicated clinical infrastructure appeared better positioned to support dual credential placements than programs without those conditions.

Cleaned Source Notes

The Institution:

- identified a limited pool of highly qualified and willing mentors. The notes also identified high workload, time constraints, and special education staffing shortages as barriers to building and sustaining mentor capacity.
- connected mentor capacity to the district's broader inclusive practice structures, including collaborative co-teaching, secondary co-teaching, and push-in/resource support.
- identified a shortage of Education Specialist teachers willing to mentor and able to meet CTC requirements. The notes indicate that mentor eligibility and willingness are both constraints.
- connected mentor shortages to the feasibility of balanced clinical practice across special education and general education settings.
- noted that long-term mentoring of two candidates in collaborative co-teaching classrooms is mentally demanding and suggested rotating mentor teachers to avoid burnout. also indicated that mentor teachers receive compensation and professional learning support.

- emphasized mentor sustainability, including the need to avoid burnout in collaborative co-teaching classrooms and to support mentor teachers through compensation and professional learning.
- raised questions about how to fund two mentors in co-teaching settings, including whether each mentor would receive a full stipend or whether the stipend and work would be split; also raised questions about how to make the model workable for the LEA if it becomes twice as expensive.
- noted that mentors need a clear understanding of the TPEs being taught and practiced and how those expectations differ by time of year. The notes also identified graduate release time as an issue.
- identified mentor compensation, mentor understanding of expectations, and LEA incentives for co-teaching as issues connected to implementation of an integrated pathway.
- identified difficulty finding highly qualified special education mentors and described bringing general education and special education mentors together to build capacity.
- connected mentor capacity to the one-year residency model, split placements, and the need for county-level coordination when local districts and SELPA LEAs are small.
- described qualified Education Specialist mentors as difficult to find and noted recognition events, professional development, and mentor cafes as supports.
- identified mentor support as part of making Education Specialist placements and dual credential fieldwork feasible.
- identified concentrated district placements, partnership maturity, and clinical practice infrastructure as helpful to supporting mentors and placements. The notes suggest that mentor capacity is strengthened when programs and districts have established partnership routines rather than relying on one-off placement arrangements.

C.2.4 TPA, Assessment, and Demonstration of Competency

Summary

Assessment appeared across the listening sessions as both a workload issue and a pathway design issue. Participants discussed when candidates complete TPA cycles, whether assessment expectations can be distributed across placements, how programs support candidates, and whether prior demonstration of competency should reduce repeated requirements for current credential holders. The record suggests that assessment design cannot be separated from clinical practice design because TPA cycles are completed in specific teaching contexts and must align with candidate placements, coursework, and supervision.

The listening record reflects particular concern about the timing and compression of TPA requirements. Completing both cycles during a full-time student teaching semester was described as especially challenging. Several sessions raised the possibility of distributing TPA cycles across the year or across general education and special education placements. Programs also described support structures such as seminars or coursework aligned to TPA completion. These notes suggest that the issue is not only whether an assessment is required, but also when

and where the assessment is completed and how the program supports candidates through that process.

Current credentialed teacher input raised a different assessment issue: whether educators who have already demonstrated competency should be required to repeat assessments when adding a second credential. Teachers raised the possibility of recognizing prior demonstrated competency and considering National Board Certification or other evidence toward requirements. This concern is distinct from preservice TPA sequencing, but both point to the need to examine assessment requirements as part of route design rather than treating them as fixed add-ons.

Cleaned Source Notes

The Institution:

- described completing both TPA cycles in one semester while student teaching full time as extremely challenging. The notes suggested allowing one cycle in general education and one cycle in special education.
- connected TPA timing to the structure of student teaching and the challenge of completing assessment requirements while candidates are fully engaged in clinical practice.
- reported a 98 percent pass rate and described a one-unit TPA seminar. also described separating completion of TPAs over two semesters, with one in general education and one in special education.
- indicated that the TPA seminar and sequencing across two semesters were supports for candidate completion.
- identified time as the roadblock, with TPA 1 in November and TPA 2 in February. also noted improved pass rates after rubric and scoring changes.
- connected TPA timing to the one-year residency schedule and the practical challenge of fitting assessment expectations into an intensive dual credential pathway.
- described TPA challenges tied to ensuring all TPEs are covered. The notes also identified a TPA support class and good pass rates.
- indicated that TPA support is part of the program structure for helping candidates navigate dual credential requirements.
- raised questions about which TPA should be used, whether to eliminate TPA, and the lack of flexibility in cycle structure.
- connected TPA questions to broader TPE complexity and the design of stacked or add-on pathways.
- raised assessment-related barriers involving IEP minutes, misperceptions about how services can be provided, and SAI/SDI. also identified other states, including New York, Maryland, and Washington, as possible places to examine for dual credentialing structures.

- Currently credentialed teachers raised the issue of avoiding repeated assessments where competencies have already been demonstrated. They also suggested that National Board Certification could potentially count toward a second credential.
- Teacher focus group participants raised concern that adding a credential should not require unnecessary repetition of assessments or requirements when an educator has already demonstrated relevant competencies.

C.2.5 Pathway Clarity, Advising, and Candidate Recruitment

Summary

Listening sessions indicated that dual credentialing depends not only on formal requirements, but also on whether candidates, advisers, districts, and programs understand the pathway early enough to make it actionable. Participants raised issues of terminology, pathway visibility, recruitment, advising, and consistency of guidance. Several sources noted that candidates may not know dual credential options exist or may not understand credential language, including the meaning of “Education Specialist.”

The record also reflects a timing issue. Candidates need to understand available pathways before coursework, clinical practice, and assessment decisions narrow their options. If candidates learn about dual credential options too late, the pathway may no longer be feasible without extending time, adding cost, or requiring additional fieldwork. This theme connects directly to survey findings showing uncertainty about whether preliminary programs offered dual credential pathways.

Programs asked for clearer CTC guidance, FAQs, and guardrails for creating compliant dual credential pathways. Recruitment concerns were tied to program length, the perceived workload burden of adding special education preparation, candidate interest in special education roles, and the extent to which dual credentialing is presented as a visible statewide option rather than a boutique program available only through particular institutions or local partnerships. Several sources also raised the importance of undergraduate pipelines, minors, advising tools, and clearer explanations of how dual credentialing relates to employment opportunities.

Cleaned Source Notes

The Institution:

- noted that the dual option is often seen as a boutique program rather than a statewide option and that candidates may only learn about it if someone tells them.
- connected candidate awareness to advising, common foundational courses, residency funding, and clinical partnerships.
- Currently credentialed teachers identified the need for clear communication about the pathway and noted that clarity would also be critical in CTE contexts.
- Teacher focus group participants raised the need for clarity about what the pathway means, what it authorizes, and what the practical implications may be for educators.

- stated that the pathway process was easier than expected once they understood the requirements and asked whether there should be an FAQ about the rules or guardrails for creating a compliant dual credentialing pathway.
- identified a recruitment rationale that some candidates want both credentials so they can work across settings, that inclusive classrooms require the full range of skills to teach all learners, and that dual credentialing may provide labor market flexibility when there are fewer Multiple Subject opportunities.
- identified district partners for possible pilot development and described interest in beginning with limited pilots before scaling more broadly.
- identified the longer two-year program as less attractive to candidates and noted difficulty attracting enough applicants, in part because there is less interest in becoming an Education Specialist.
- connected candidate recruitment to the structure, length, and perceived attractiveness of the dual credential pathway.
- raised the need for clearer supplemental authorization information and noted uncertainty about common trunk guidance.
- connected pathway clarity to questions about program structure, supplemental authorization, and how coursework and clinical experiences are merged.
- described undergraduate pipeline work, including reducing units in Liberal Studies and creating special education and bilingual education minors to demystify credential choices.
- connected undergraduate pipeline development to candidate understanding of credential options and earlier recruitment into dual or special education-related pathways.

C.2.6 Cost, Time, Program Length, and Sustainability

Summary

Cost, time, program length, and sustainability were raised across source types. Participants described candidate affordability, financial aid, program length, stipends, grant eligibility, mentor compensation, faculty time, district capacity, and the feasibility of scaling dual credential pathways. The record suggests that dual credential pathways may become inaccessible if they add substantial units, extend program length, require additional unpaid clinical practice, or depend on funding structures that are not broadly available.

Residency and grant funding were repeatedly described as important to making dual credential models feasible for candidates and partners. Several sources identified specific funding mechanisms or supports, including CTC residency grants, ITEP funding, OSEP funding, resident stipends, mentor stipends, and district-supported pathways. However, the record also indicates that reliance on grants may create sustainability and equity questions. Models supported by strong partnerships or external funding may not be easily replicated by programs serving smaller districts, SELPA LEAs, rural regions, or institutions without existing clinical infrastructure.

Several sources also identified structural sustainability concerns, including mentor stipends, resident stipends, faculty collaboration time, clinical infrastructure, and the ability of small districts or SELPA LEAs to participate in grant-funded models. Financial aid complications appeared where candidates may technically qualify for one credential before completing requirements for the second credential. This theme suggests that efficient route design will need to address not only regulatory requirements, but also the financial and operational conditions under which candidates and programs can participate.

Cleaned Source Notes

The Institution:

- Currently credentialed teachers stated that dual credentialing should not cost more money or take an excessive amount of time. They identified free or reduced tuition, grants, district-paid programs, and flexible pathways as ideas.
- Teacher focus group participants raised concern that cost, time, and workload may discourage educators from adding another credential even where there is interest.
- described the additional student teaching semester as a financial hurdle before residency funding and noted that CTC residency grants were a game changer.
- connected residency funding to candidate feasibility and identified grant support as a major factor in making the pathway workable.
- described a one-year residency with a \$38,000 stipend and noted that applies for residency grant funding because local districts and SELPA LEAs are too small to apply on their own.
- connected program sustainability to county-level or regional capacity, small LEA and SELPA constraints, mentor availability, and residency grant administration.
- described CTC, ITEP, and federal OSEP grant funding. also raised financial aid concerns when candidates meet one credential before the other.
- raised concern that financial aid structures may not align cleanly with dual credential sequencing when candidates satisfy one credential's requirements before the other.
- described enrollment concerns and difficulty selling a program perceived as too long, especially in competition with other providers.
- connected program length and candidate recruitment to the feasibility of stacked dual credential models.
- identified funding for two mentor stipends, residency expansion grants, faculty collaboration time, and LEA incentives for co-teaching as wish-list items. also asked whether more guidance could be provided for LEAs applying for residency funding so they could generate new dual credentialing ideas.
- raised questions about whether the dual credential model becomes twice as expensive for LEAs if two mentors are required and how mentor stipends should be structured in co-teaching settings.

- noted that funding can make a major difference and that applications increased when residency funding supported candidates.
- connected residency funding, candidate interest, and clinical partnerships as conditions that affect pathway participation.

C.2.7 Guardrails, Assignment Implications, and Educator Protections

Summary

Current credentialed teacher input raised a distinct set of concerns about how dual credentials might be used after issuance. These concerns were different from the program-design and implementation concerns raised by preparation programs. Teachers focused on assignment practices, workload, multiple preparations, case management, caseloads, CBA implications, and the need for guardrails to prevent unintended consequences.

The record indicates that some current credentialed teachers were concerned that holding an additional credential could increase employer flexibility in ways that do not align with educator intent, workload protections, or service-delivery realities. These concerns do not necessarily reflect opposition to dual credentialing. They indicate that preparation-route design and credential authorization do not, by themselves, resolve questions about how dual credentials may be used in local employment contexts after issuance.

This theme should be treated separately from preparation quality and program approval. It concerns what happens after a credential is issued: how educators may be assigned, how workload is managed, how caseload and case management responsibilities are distributed, and how local collective bargaining contexts may be affected. The record suggests that any expansion of dual credential pathways should be accompanied by clear communication about what the credential authorizes, what it does not require, and how assignment implications should be understood.

Cleaned Source Notes

The Institution:

- Currently credentialed teachers raised concern that administrators may assign teachers to special education courses because they hold the credential, even if the teacher does not want that assignment.
- Teachers raised fears that dual credentials could create multiple preps, employer flexibility beyond what educators intended, and unintended consequences for assignment decisions.
- Teachers specifically identified the need for guardrails and protections for educators. They also raised potential impacts to CBAs.
- Teacher focus group participants identified concerns about workload, assignment implications, case management, caseloads, and the practical consequences of adding authorization areas.

- Teacher focus group participants raised concern that districts could use dual credentialing to expand flexibility without adequate attention to workload, caseload, or service-delivery protections.
- Teacher focus group participants also raised clarity and fairness concerns, including how dual credentials would be understood by educators, administrators, and districts.
- raised questions about rules or guardrails for compliant dual credentialing pathways. These guardrail questions were focused primarily on pathway design and compliance rather than assignment protections.
- The primary assignment-protection concerns in the record came from current credentialed teachers rather than from program sponsors.

C.2.8 Preparation Quality and Student Impact

Summary

Across sessions, participants treated efficiency and quality as linked. The listening record distinguishes between reducing duplication and reducing preparation. Participants repeatedly raised the need to maintain adequate clinical practice, coursework, mentoring, and credential-specific preparation while identifying areas where duplicated requirements may be reduced. This theme is important because it places limits on how streamlining should be understood. The record supports reducing unnecessary repetition, but it does not support treating all additional preparation as duplicative.

Several sources framed dual credentialing around inclusive practice and the belief that all teachers need stronger preparation to teach students with disabilities and diverse learners. Program participants described dual credential preparation as a way to strengthen inclusive practice, build collaboration between general education and special education, and prepare candidates to serve students across settings. At the same time, several sources emphasized that candidates need substantial preparation in both credential areas so that one credential does not become secondary to the other.

The record also reflects student-impact concerns. Participants raised questions about whether dual credential routes are best for students, whether general education teachers receive sufficient preparation for students with disabilities and behavioral needs, whether Education Specialists receive enough content and pedagogy preparation, and how programs can ensure both credentials are fully represented. Some programs described dual credential graduates as more employable or more prepared, but also emphasized the need for substantial experience across both general education and special education. This theme supports careful route design that reduces duplication while preserving preparation depth, clinical experience, and role-specific competence.

Cleaned Source Notes

The Institution:

- described 905 clinical practice hours as time intensive but said that the model fully prepares candidates to teach on day one.

- described differentiated instruction, positive behavior support, curricular adaptations, and specialized academic instruction in the general education setting as part of candidate preparation.
- stated that general education teachers often do not have enough training to teach students who are not identified or who have behavior challenges. also reported that districts say residents are more prepared than traditional student teaching candidates.
- connected dual credential preparation to district perceptions that residents are more prepared and to the need for general education teachers to better support students with disabilities and behavioral needs.
- emphasized balanced clinical experience and stated that its focus is a dual credential program, not an add-on, because it does not want candidates to lose either credential in the design.
- raised concern that both credential areas need to remain represented in the pathway and that balanced clinical hours are part of maintaining preparation quality.
- framed the work around inclusive classrooms, neurodiversity, and ensuring residents and mentors share the vision of inclusive practice; also noted that, for teacher candidates entering special education, dual credentialing may provide more experience with the pedagogy of teaching.
- connected inclusive classrooms and shared understanding of inclusive practice to preparation quality and student impact.
- described the need for Education Specialists to have content expertise to be effective collaborators and noted a continuing divide between general education and special education.
- connected content expertise, literacy collaboration, and inclusive placement challenges to the quality of dual credential preparation.
- Currently credentialed teachers raised no repeated assessments where competencies have already been demonstrated, while also raising concerns about clarity, fairness, and workload.
- Teacher focus group participants raised the need to distinguish between removing unnecessary duplication and weakening preparation quality.
- Across sources, quality concerns appeared in questions about what counts as competency, how much clinical practice is enough, and how programs ensure that both credentials are fully represented rather than allowing one credential area to become secondary to the other.