FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

														-							
Name and Address of Reporting Person* Rothenstein David M							2. Issuer Name and Ticker or Trading Symbol CIENA CORP [CIEN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Rotnen	<u>stein Dav</u>	<u>10 M</u>			1	CILITI COIG [CIEN]										Direc	ctor	10%	Owner		
,		-										X	Office	er (give title w)	Othe below	r (specify v)					
(Last)	(Fi		3. Date of Earliest Transaction (Month/Day/Year)											Sr. VP, General Counsel		,					
C/O CIENA CORPORATION							05/15/2015										51. VI, GEI	ierai Courisei			
702F DIE	OCE DD																				
7035 RIDGE RD.							4 If Assess descent Date of Original Filled (Manufa/D. 1977)									C. ladicidual and laint/Consum Fillian (Obsada A. P. 11					
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X Form filed by One Reporting Person						
HANOV	HANOVER MD 21076-142			26											Form filed by More than One Reporting						
					-											Pers		e than One Re	porting		
(City)	(St	ate) (Zip)												. 2.22						
(City)	(50	aie) (Ζιρ)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transact																ount of	6. Ownership	7. Nature			
		,		Date (Month/	Dov/Voo	ay/Year) Execution Date, if any (Month/Day/Year)			Transaction Disposed Of (D) (In Code (Instr. 5)) (Instr.	3, 4 ar	Benefi Owner			Form: Direct (D) or Indirect	of Indirect Beneficial			
				(WOTHLINE	Jayrica												d Following	(I) (Instr. 4)	Ownership		
													(A) or Price			Repor	ted action(s)		(Instr. 4)		
						Code	۱۷	Amount		(A) 01 (D)	Price		(Instr. 3 and 4)								
Common	Stock	/2015				S		1,500(1	1)	D \$22		.29 256,121 ⁽²⁾		D							
		Ta									sed of,				y Ov	vned					
			(e.g., p	uts, c	alls	, warr	ants,	option	ıs, c	onvertib	le s	ecuri	ties)							
1. Title of	2.	3. Transaction	3A. Deem	ned	4.		5. Number		6. Date E	sable and	able and 7. Title and			8. Price		9. Number o	f 10.	11. Nature			
Derivative	Conversion	Date	Execution	n Date,	Transactio Code (Insti 8)				(Month/Day/Year)			Amount of Securities Underlying			Derivative Security (Instr. 5)		derivative	Ownership			
Security (Instr. 3)	or Exercise Price of	(Month/Day/Year)	if any (Month/Da														Securities Beneficially	Form: Direct (D)	Beneficial Ownership		
(Derivative		(-,		Acquired					Derivative					Owned	or Indirect	(Instr. 4)		
Security							(A) or Disposed		Security (Ins				str. 3			Following Reported	(I) (Instr. 4)				
						of (D)					""" +,					Transaction(s)	(s)				
							(Instr. 3, 4 and 5)										(Instr. 4)				
							and 3)				_	1.						1			
													Am or	ount							
														mber					1		
					Code	v	(0)		Date Exercisa		Expiration Date	Title	of	ares					1		
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Explanation of Responses:

- 1. Sales were effected pursuant to Rule 10b5-1 trading plan dated 1/15/2015.
- 2. Shares reported include unvested Restricted Stock Units (RSUs).

By: Erik Lichter For: David M. Rothenstein

05/18/2015

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.