## FORM 4

Check this box if no longer subjection 16. Form 4 or Form 5

obligations may continue. See

Instruction 1(b)

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

t to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person*  SMITH GARY B						2. Issuer Name <b>and</b> Ticker or Trading Symbol  CIENA CORP [ CIEN ]									ationship k all appli Directo	•		son(s) to Iss 10% Ov	
(Last) (First) (Middle) C/O CIENA CORPORATION 1201 WINTERSON ROAD						3. Date of Earliest Transaction (Month/Day/Year) 11/03/2007										Officer (give title below) Presider		Other (s below)	specify
(Street) LINTHICUM MD 21090 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year) 11/06/2007									dividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
		Tab	le I - I	Non-Deri	vative	e Sec	urit	ies A	cquire	ed, D	Disposed o	of, or B	enefic	cially	Owned				
Dat		2. Transact Date (Month/Day	-	Execution Date,		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Benefic Owned		es ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock			11/03/2	007				F		1,276(1)	D	\$46	5.88	93	93,352		D		
Common Stock			11/05/2007		,		M		3,840	Α	\$19	319.95		97,192		D			
Common Stock			11/05/2	2007				S <sup>(2)</sup>		3,840	D	\$46.4	1576 <sup>(3)</sup> 93		3,352		D		
		7	able								sposed of				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)		5. Number n of		<del>, .</del>		ate	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		S (I	B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
						v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amo or Num of Shar	ber					
Non- Qualified Stock Option (right-to- buy)	\$19.95	11/05/2007			М			3,840	(4	l)	12/10/2014	Commo Stock	a 3,84	40	\$0.00	23,120	)	D	

## **Explanation of Responses:**

- 1. Shares reported represent the amount forfeited to cover the tax liabilities of the reporting person pursuant to a restricted stock unit (RSU) award agreement dated November 1, 2005. The RSU vests at the end of Ciena's fiscal quarters over a four year year term and shares are issued net of taxes upon vesting. Acquisition of the RSU was previously reported in Table I of reporting person's Form 4 filed on November 3,
- 2. Sales were effected pursuant to Rule 10b5-1 trading plan dated June 22, 2007.
- 3. Reflects the average sale price of the total shares sold. Actual sale prices are as follows: 100 shares at \$46.18; 100 shares at \$46.54; 100 shares at \$46.45; 100 shares at \$46.21; 300 shares at \$46.24; 100 shares at \$46.45; 100 shares at shares at \$46.15; 100 shares at \$46.43; 100 shares at \$46.55; 100 \$46.98; 100 shares at \$46.81; and 100 shares at \$45.86.
- 4. Option is fully vested.

## Remarks:

By: Erik Lichter For: Gary B. Smith \*\* Signature of Reporting Person

11/20/2007

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.