



# FREMONT UNIVERSITY BPPE ANNUAL REPORT

2025

**The 2025 Bureau for Private Postsecondary Education (BPPE) Annual Report includes data reflecting enrollment data, completion statistics, and graduation and employment statistics for the calendar year 2024.**

Report prepared by: Phillip Wang

## Institution Data



# Bureau for Private Postsecondary Education

Department of Consumer Affairs

## 2024 Annual Report

### Institution Data Workflow

([Printer Friendly Annual Report Instructions Document](#))

#### 2024 BPPE Annual Report - Institution - General Info

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Annual Report data is institutional data that is combined for the main location, branch and all satellite locations.

**1. Report Year \***

**2024**

**2. Institution Code \***

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

**3. Institution Name (auto-populated) \***

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

**4. Street Address (Physical Location) \***

**18000 Studebaker Rd Suite 900A**

5. City \*

**Cerritos**

6. State \*

**CA**

7. Zip Code \*

**90703**

8. Select the type of business organization for this institution \*

**Limited Liability Company (LLC)**

9. Number of Branch Locations \*

Indicate the number of branch locations associated with the main location. If none, enter zero ("0")

**0**

10. Number of Satellite Locations \*

Indicate the number of branch locations associated with the main location or branch location. If none, enter zero ("0")

**0**

## Graduate Identification Data

### 2024 BPPE Annual Report - Institution - Graduate Identification Data

New Reporting Requirement: California Education Code section 94892.6 requires that institutions approved to operate by the Bureau collect, retain, and report specified information about each graduate completing a program on or after January 1, 2020. This includes identifying information for each graduate along with information about the program from which they graduated and the amount of student loan debt borrowed. Pursuant to Title 5, California Code of Regulations section 74110, beginning in 2022 institutions will report this information to the Bureau annually through the Annual Report submission process.

The AR\_LaborMarketData\_2024 reporting template linked below includes details about the data required to be reported for each student who graduated from the institution's education program(s) between January 1, 2024 and December 31, 2024. Click on the link to the template and save to your computer to fill out. After adding the required information to the "Data" tab, press the "Select files" button at the bottom of the portal Graduate Identification Data page to upload and attach your completed AR\_LaborMarketData\_2024 report to the institution's Annual Report submission. Uploaded files must be in Excel or CSV formats.

Please contact Jennifer Jones ([Jennifer.jones@dca.ca.gov](mailto:Jennifer.jones@dca.ca.gov)) with questions about this requirement.

[AR\\_LaborMarketData\\_2024.xlsx](#)

Upload completed Excel or CSV  
here \*

**AR\_LaborMarketData\_2024.xlsx**

## Fees / Accreditation

### 2024 BPPE Annual Report - Institution - Fees/Accreditation

Display Instructions for #11 - #14 (Toggle)

**Checked**

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**11a. Is this institution current with all assessments to the Student Tuition Recovery Fund?** Indicate "Yes" if the institution has completed and submitted all quarterly assessment forms required, along with the appropriate assessment, for the Student Tuition Recovery Fund. Indicate "No" if the institution has not completed and submitted, along with the appropriate assessments, all quarterly assessment forms required for the Student Tuition Recovery Fund.

**11b. Is this institution current on Annual Fees?** Indicate "Yes" if the institution has paid its Annual Fees. Indicate "No" if the institution has not paid its Annual Fees.

**12. Is your institution accredited by an accrediting agency/agencies recognized by the United States Department of Education?** Include only full institutional accreditation, not programmatic accreditation. **Enter the name of the accrediting agency.** Refer to the attached list of accrediting agencies recognized by the United States Department of Education.

**13. If your institution has specialized accreditation from a recognized United States Department of Education approved specialized/programmatic accreditor, list the accreditation below.**

**14. Has any accreditation agency taken any final disciplinary action against this institution in the reporting year?** Indicate "yes" if the institution has had final disciplinary action taken against it by an accreditation agency; Indicate "no" if no final action has been taken against the institution by an accreditation agency. If Yes, please upload a copy of the action at #14a.

11a. Is this institution current with all assessments to the Student Tuition Recovery Fund? \*

**Yes**

11b. Is this institution current on Annual Fees? \*

**Yes**

12. Is your institution accredited by an accrediting agency/agencies recognized by the United States Department of Education? \*

**Yes**

You indicated "Yes" to #12 above, please identify the accrediting agency(ies) below.

Follow the tips below to select more than one agency:

**FOR PC USERS:** While using the mouse to select items, make sure you hold down the Control (Ctrl) key.

**FOR MAC USERS:** While using the mouse to select items, make sure you hold down the Command (Cmd) key.

12a. Accrediting Agency (more than one agency may be selected) \*

**Accrediting Commission of Career Schools and Colleges**

13. If your institution has specialized accreditation from a recognized United States Department of Education approved specialized/programmatic accreditor, list the accreditation below.

**American Bar Association, California Massage Therapy Council**

14. Has any accreditation agency taken any final disciplinary action against this institution in the reporting year? Indicate "yes" if the institution has had final disciplinary action taken against it by an accreditation agency; Indicate "no" if no final action has been taken against the institution by an accreditation agency. If Yes, please upload a copy of the action at #14a. \*

**No**

## Financial

### 2024 BPPE Annual Report - Institution - Financial

For the questions below, please disclose any funds received by the institution from the federal and/or state government to provide services

to the general public.

Display Instructions for #15 - #26 (Toggle)

Checked

## Instructions

(Printer Friendly Annual Report Instructions Document)

**21. Provide the percentage of institutional income in the Report Year derived from public funding.** (Add #15, #16, #17, and #19. Divide the sum by Institution's Total Revenue) All money that is generated by the government to provide services to the general public is "public funding."

**23. Provide the percentage of institutional income during this reporting year derived from any non-government financial aid.** All non-government financial aid divided by total revenue.

**24. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable.** The Cohort Default Rate (CDR) represents the percentage of this institution's students that failed to make required payments on their federal loans within three years of when they were required to begin repayment of that loan.

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15. Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act? (This includes federal loans and grants)

\*

**Yes**

15a. What is the total amount of Title IV funds received by your institution in this Reporting Year? \*

**\$2,604,906.00**

16. Does your institution participate in veterans' financial aid education programs? \*

**Yes**

16a. What is the total amount of veterans' financial aid funds received by your institution in this Reporting Year? \*

**\$272,679.00**

17. Does your institution participate in the Cal Grant program? \*

**Yes**

17a. What is the total amount of Cal Grant Funds received by your institution in this Reporting Year? \*

**\$8,812.00**

18. Is your institution on California's Eligible Training Provider List (ETPL)? \*

**No**

19. Is your institution receiving funds from the Work Innovation and Opportunity Act (WIOA) Program? \*

**No**

20. Does your Institution participate in, or offer, any other state or federal government financial aid programs? (i.e., vocational rehab...) \*

**Yes**

20b. What is the total amount of any other state or federal funds received by your institution in the reporting year? \*

**\$123,257.00**

22. Does your Institution participate in, or offer any non-government financial aid programs? (i.e., private grants/loans, institutional grants/loans) \*

**Yes**

23. The percentage of institutional income in the reporting year derived from any non-government financial aid. \*

**8**

20a. You indicated "Yes" for #20, please provide the name of the financial aid program below. \*

**Vocational Rehab**

21. Provide the percentage of institutional income during this Reporting Year derived from public funding. \*  
If none, indicate "0".

**82**

22a. You indicated "Yes" for #22, please provide the name of the financial aid programs below.

**Private Education Loans,  
Institutional Scholarship**

24. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable. \*  
If Not Applicable, indicate "0".

**0**

25. Provide the percentage of the students who attended this institution during this Reporting Year who received federal student loans to help pay their cost of education at the school. \*  
If none, indicate "0".

**83**

26. Provide the average amount of federal student loan debt of graduates who took out federal student loans at this institution. \*

**\$16,821.00**

## Offerings

### 2024 BPPE Annual Report - Institution - Offerings

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Display Instructions for #27 - #37 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**27. Total number of students enrolled at this institution in the reporting year.** Indicate the number of students attending and/or enrolled in all programs at your institution (minus the number of students in the reporting year who cancelled during the cancellation period) January 1st through December 31st.

**28. Number of Doctorate Degree Programs Offered?** Indicate the number of Doctorate degree Programs the institution offered for the reporting year. (Number of Programs not Students)

**29. Number of Students enrolled in Doctorate programs at this institution?** Indicate the number of students enrolled and/or active in all Doctorate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

**30. Number of Master Degree Programs Offered?** Indicate the number of Master degree Programs the institution offered for the reporting year. (Number of Programs not Students)

**31. Number of Students enrolled in Master programs at this institution?** Indicate the number of students enrolled and/or active in all Master programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

**32. Number of Bachelor Degree Programs Offered?** Indicate the number of Bachelor degree Programs the institution offered for the reporting year. (Number of Programs not Students)

**33. Number of Students enrolled in Bachelor programs at this institution?** Indicate the number of students enrolled and/or active in all Bachelor programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

**34. Number of Associate Degree Programs Offered?** Indicate the number of Associate degree Programs offered for the reporting year. (Number of Programs not Students)

**35. Number of Students enrolled in Associate programs at this institution?** Indicate the number of students enrolled and/or active in all Associate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

**36. Number of Diploma or Certificate Programs Offered?** Indicate the number of Diploma or Certificate Programs offered for the reporting year. (Number of Programs not Students)

**37. Number of Students enrolled in diploma or certificate programs at this institution?** Indicate the number of students enrolled and/or active in all diploma/certificate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

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27. Total number of students enrolled at this institution in the reporting year. Indicate the number of students attending and/or enrolled in all programs at your institution (minus the number of students in the reporting year who cancelled during the cancellation period)

January 1st through December 31st. \*

If none, indicate "0".

271

**28. Number of Doctorate Degree Programs Offered?**

Indicate the number of Doctorate degree Programs the institution offered for the reporting year. (Number of Programs not Students) \*

If none, indicate "0".

**0****29. Number of Students enrolled in Doctorate programs at this institution? Indicate the number of students enrolled and/or active in all Doctorate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \***

If none, indicate "0".

**0****30. Number of Master Degree Programs Offered?**

Indicate the number of Master degree Programs the institution offered for the reporting year. (Number of Programs not Students) \*

If none, indicate "0".

**1****31. Number of Students enrolled in Master programs at this institution? Indicate the number of students enrolled and/or active in all Master programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \***

If none, indicate "0".

**24****32. Number of Bachelor Degree Programs Offered?**

Indicate the number of Bachelor degree Programs the institution offered for the reporting year. (Number of Programs not Students) \*

If none, indicate "0".

**3****33. Number of Students enrolled in Bachelor programs at this institution? Indicate the number of students enrolled and/or active in all Bachelor programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \***

If none, indicate "0".

**75**

**34. Number of Associate Degree Programs Offered?**

Indicate the number of Associate degree Programs offered for the reporting year. (Number of Programs not Students) \*

If none, indicate "0".

**5****35. Number of Students enrolled in Associate programs at this institution? Indicate the number of students enrolled and/or active in all Associate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \***

If none, indicate "0".

**111****36. Number of Diploma or Certificate Programs Offered? Indicate the number of Diploma or Certificate Programs offered for the reporting year. (Number of Programs not Students) \***

If none, indicate "0".

**3****37. Number of Students enrolled in diploma or certificate programs at this institution? Indicate the number of students enrolled and/or active in all diploma/certificate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \***

If none, indicate "0".

**61****Total Program Count****12**

## Website / Uploads

### 2024 BPPE Annual Report - Institution - Website and Required Uploads

**An institution that maintains a website, shall provide on the homepage of that website, clear and conspicuous links to the most recent Annual Report submitted to the Bureau, the Catalog, and School Performance Fact Sheet (CEC §94913)\*\*.**

\*\*The Bureau recommends a portion of the school's website dedicated to providing students with the required information below.

Uploads for Documents must be in PDF format. Other formatting may be too large to upload and will be rejected by BPPE staff.

Institution's Website

<https://fremont.edu>

38. Upload School Performance

Fact Sheet \*

Required file format = PDF

**SPFS\_2023-2024.pdf**

39. Upload Catalog \*

Required file format = PDF

**Catalog 2024\_(2024-0910).pdf**

40. Upload Enrollment Agreement \*

Required file format = PDF

**ENROLLMENT AGREEMENT  
(Revised 2022-06-23).pdf**

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The file upload facility below (#41) is ONLY for use when BPPE requests additional supporting documentation. The initial submission of the Annual Report does not require any action below.

41. General File Upload (only use as directed by BPPE staff)

Recommended file format = PDF

Pursuant to 5 CCR § 74110 (f)(6), **financial statements are required to be submitted via mail in hard copy format to the Bureau and attention to the Annual Report Unit**; however, the institution may in addition upload an electronic version. This is optional.

42. Upload Financial Statements

Recommended file format = PDF

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

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**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

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Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

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4. Name of Program \*

**Administration of Justice**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Bachelor**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)  
 Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

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8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

0

9. Total Charges for this Program \*

\$26,801.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

0

12. Number of Students Who Began the Program \*

If none, indicate "0".

0

13. Number of Students Available for Graduation \*

If none, indicate "0".

0

14. Number of On-time Graduates \*

If none, indicate "0".

0

15. Completion Rate

This is a calculated field based on #14 and #13.

16. 150% Graduates?

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

0

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

19. Graduates Available for Employment \*

If none, indicate "0".

0

20. Graduates Employed in the Field

\*

If none, indicate "0".

0

21. Placement Rate

This is a calculated field based on #17 and #18.

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22. Graduates employed in the field...

22a. 20 to 29 hours per week \*

If none, indicate "0".

0

22b. at least 30 hours per week \*

If none, indicate "0".

0

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23. Indicate the number of graduates employed...

23a. In a single position in the field of study \*

If none, indicate "0".

0

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \*

If none, indicate "0".

0

23c. Freelance/self-employed \*

If none, indicate "0".

0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \*

If none, indicate "0".

0

## Allied Health

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2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

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Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

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26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

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Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following**

**Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

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**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**0**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**0**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

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\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>0</b>	<b>0</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>0</b>	<b>0</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>0</b>	<b>0</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>0</b>	<b>0</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>0</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>0</b>	<b>0</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>0</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

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**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Business Leadership**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Bachelor**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

**12**

9. Total Charges for this Program \*

**\$37,482.00**

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

**86**

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

**80**

12. Number of Students Who Began the Program \*

If none, indicate "0".

**15**

13. Number of Students Available for Graduation \*

If none, indicate "0".

**15**

14. Number of On-time Graduates \*

If none, indicate "0".

**11**

15. Completion Rate

This is a calculated field based on #14 and #13.

**73.33333**

16. 150% Graduates?

12

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

80

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

19. Graduates Available for Employment \*

If none, indicate "0".

**12**

20. Graduates Employed in the Field

\*

If none, indicate "0".

**11**

21. Placement Rate

This is a calculated field based on #17 and #18.

**91.66667**

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week \*

If none, indicate "0".

**0**

22b. at least 30 hours per week \*

If none, indicate "0".

**11**

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study \*

If none, indicate "0".

**11**

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \*

If none, indicate "0".

**0**

23c. Freelance/self-employed \*

If none, indicate "0".

**1**

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \*

If none, indicate "0".

**0**

## Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

---

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

---

Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

---

Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

---

**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**12**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**11**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

---

\$0 - \$5,000 *	0	\$5,001 - \$10,000 *	0
\$10,001 - \$15,000 *	0	\$15,001 - \$20,000 *	0
\$20,001 - \$25,000 *	0	\$25,001 - \$30,000 *	0
\$30,001 - \$35,000 *	0	\$35,001 - \$40,000 *	0
\$40,001 - \$45,000 *	2	\$45,001 - \$50,000 *	1
\$50,001 - \$55,000 *	0	\$55,001 - \$60,000 *	1
\$60,001 - \$65,000 *	0	\$65,001 - \$70,000 *	1
\$70,001 - \$75,000 *	0	\$75,001 - \$80,000 *	1

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>1</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>1</b>	<b>0</b>
Over \$100,000 *	
<b>1</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

---

**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Business Management**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Associate**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

5

9. Total Charges for this Program \*

\$37,366.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

67

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

60

12. Number of Students Who Began the Program \*

If none, indicate "0".

9

13. Number of Students Available for Graduation \*

If none, indicate "0".

9

14. Number of On-time Graduates \*

If none, indicate "0".

5

15. Completion Rate

This is a calculated field based on #14 and #13.

55.55556

16. 150% Graduates?

5

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

55.55556

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

**19. Graduates Available for Employment \***

If none, indicate "0".

**4****20. Graduates Employed in the Field****\***

If none, indicate "0".

**3****21. Placement Rate**

This is a calculated field based on #17 and #18.

**75****22. Graduates employed in the field...****22a. 20 to 29 hours per week \***

If none, indicate "0".

**0****22b. at least 30 hours per week \***

If none, indicate "0".

**3****23. Indicate the number of graduates employed...****23a. In a single position in the field of study \***

If none, indicate "0".

**3****23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \***

If none, indicate "0".

**0****23c. Freelance/self-employed \***

If none, indicate "0".

**0****23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \***

If none, indicate "0".

**0**

## Allied Health

### 2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

**24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

**24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

**25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed.** Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.

**24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

---

Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

---

Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following**

**Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

---

**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**4**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**3**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

---

\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>0</b>	<b>0</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>0</b>	<b>1</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>0</b>	<b>1</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>0</b>	<b>0</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>0</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>0</b>	<b>0</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>1</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

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**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Masters of Business Administration**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Master**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

**8**

9. Total Charges for this Program \*

**\$26,630.00**

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

**92**

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

**100**

12. Number of Students Who Began the Program \*

If none, indicate "0".

**8**

13. Number of Students Available for Graduation \*

If none, indicate "0".

**8**

14. Number of On-time Graduates \*

If none, indicate "0".

**8**

15. Completion Rate

This is a calculated field based on #14 and #13.

**100**

16. 150% Graduates?

8

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

100

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

19. Graduates Available for Employment \*

If none, indicate "0".

**8**

20. Graduates Employed in the Field

\*

If none, indicate "0".

**6**

21. Placement Rate

This is a calculated field based on #17 and #18.

**75**

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week \*

If none, indicate "0".

**0**

22b. at least 30 hours per week \*

If none, indicate "0".

**6**

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study \*

If none, indicate "0".

**6**

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \*

If none, indicate "0".

**0**

23c. Freelance/self-employed \*

If none, indicate "0".

**1**

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \*

If none, indicate "0".

**0**

## Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

---

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

---

Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

---

Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

---

**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**8**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**6**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

---

\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>0</b>	<b>0</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>0</b>	<b>0</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>1</b>	<b>0</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>0</b>	<b>0</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>1</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>1</b>	<b>1</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>2</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

---

**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Health Administration**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Diploma/Certificate**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

3

9. Total Charges for this Program \*

\$19,329.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

88

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

100

12. Number of Students Who Began the Program \*

If none, indicate "0".

6

13. Number of Students Available for Graduation \*

If none, indicate "0".

6

14. Number of On-time Graduates \*

If none, indicate "0".

2

15. Completion Rate

This is a calculated field based on #14 and #13.

33.33333

16. 150% Graduates?

3

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

50

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

19. Graduates Available for Employment \*

If none, indicate "0".

**2**

20. Graduates Employed in the Field

\*

If none, indicate "0".

**2**

21. Placement Rate

This is a calculated field based on #17 and #18.

**100**

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week \*

If none, indicate "0".

**0**

22b. at least 30 hours per week \*

If none, indicate "0".

**2**

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study \*

If none, indicate "0".

**2**

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \*

If none, indicate "0".

**0**

23c. Freelance/self-employed \*

If none, indicate "0".

**0**

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \*

If none, indicate "0".

**0**

## Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

---

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

---

Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

---

Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

---

**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**2**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**2**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

---

\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>0</b>	<b>0</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>0</b>	<b>0</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>1</b>	<b>1</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>0</b>	<b>0</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>0</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>0</b>	<b>0</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>0</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

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**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Health Information Technology**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Associate**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

**12**

9. Total Charges for this Program \*

**\$37,890.00**

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

**94**

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

**92**

12. Number of Students Who Began the Program \*

If none, indicate "0".

**18**

13. Number of Students Available for Graduation \*

If none, indicate "0".

**18**

14. Number of On-time Graduates \*

If none, indicate "0".

**10**

15. Completion Rate

This is a calculated field based on #14 and #13.

**55.55556**

16. 150% Graduates?

12

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

66.66667

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

**19. Graduates Available for Employment \***

If none, indicate "0".

**10****20. Graduates Employed in the Field****\***

If none, indicate "0".

**6****21. Placement Rate**

This is a calculated field based on #17 and #18.

**60****22. Graduates employed in the field...****22a. 20 to 29 hours per week \***

If none, indicate "0".

**0****22b. at least 30 hours per week \***

If none, indicate "0".

**6****23. Indicate the number of graduates employed...****23a. In a single position in the field of study \***

If none, indicate "0".

**6****23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \***

If none, indicate "0".

**0****23c. Freelance/self-employed \***

If none, indicate "0".

**0****23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \***

If none, indicate "0".

**0**

## Allied Health

### 2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

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Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

---

Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

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**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**10**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**6**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

---

\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>0</b>	<b>0</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>0</b>	<b>1</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>1</b>	<b>0</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>0</b>	<b>1</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>0</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>1</b>	<b>0</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>1</b>	<b>1</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>0</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

---

**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Healthcare Management**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Bachelor**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)  
 Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

**13**

9. Total Charges for this Program \*

**\$37,701.00**

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

**85**

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

**79**

12. Number of Students Who Began the Program \*

If none, indicate "0".

**15**

13. Number of Students Available for Graduation \*

If none, indicate "0".

**15**

14. Number of On-time Graduates \*

If none, indicate "0".

**7**

15. Completion Rate

This is a calculated field based on #14 and #13.

**46.66667**

16. 150% Graduates?

13

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

86.66667

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

**19. Graduates Available for Employment \***

If none, indicate "0".

**11****20. Graduates Employed in the Field****\***

If none, indicate "0".

**10****21. Placement Rate**

This is a calculated field based on #17 and #18.

**90.90909****22. Graduates employed in the field...****22a. 20 to 29 hours per week \***

If none, indicate "0".

**1****22b. at least 30 hours per week \***

If none, indicate "0".

**9****23. Indicate the number of graduates employed...****23a. In a single position in the field of study \***

If none, indicate "0".

**10****23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \***

If none, indicate "0".

**0****23c. Freelance/self-employed \***

If none, indicate "0".

**0****23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \***

If none, indicate "0".

**0**

## Allied Health

### 2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

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Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

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Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following**

**Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**11**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**10**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>0</b>	<b>0</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>1</b>	<b>0</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>3</b>	<b>1</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>1</b>	<b>1</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>1</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>0</b>	<b>1</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>1</b>	<b>0</b>
Over \$100,000 *	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

---

**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Medical Billing, Coding and Office Administration**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Diploma/Certificate**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

**8**

9. Total Charges for this Program \*

**\$19,314.00**

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

**70**

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

**100**

12. Number of Students Who Began the Program \*

If none, indicate "0".

**14**

13. Number of Students Available for Graduation \*

If none, indicate "0".

**14**

14. Number of On-time Graduates \*

If none, indicate "0".

**4**

15. Completion Rate

This is a calculated field based on #14 and #13.

**28.57143**

16. 150% Graduates?

8

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

**57.14286**

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

19. Graduates Available for Employment \*

If none, indicate "0".

**8**

20. Graduates Employed in the Field

\*

If none, indicate "0".

**6**

21. Placement Rate

This is a calculated field based on #17 and #18.

**75**

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week \*

If none, indicate "0".

**0**

22b. at least 30 hours per week \*

If none, indicate "0".

**6**

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study \*

If none, indicate "0".

**6**

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \*

If none, indicate "0".

**0**

23c. Freelance/self-employed \*

If none, indicate "0".

**0**

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \*

If none, indicate "0".

**0**

## Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

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Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

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Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

---

Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

---

**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**8**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**6**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

---

\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>0</b>	<b>1</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>0</b>	<b>0</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>1</b>	<b>3</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>0</b>	<b>1</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>0</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>0</b>	<b>0</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>0</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

---

**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Paralegal Studies**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Associate**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

2

9. Total Charges for this Program \*

\$39,087.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

63

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

50

12. Number of Students Who Began the Program \*

If none, indicate "0".

7

13. Number of Students Available for Graduation \*

If none, indicate "0".

7

14. Number of On-time Graduates \*

If none, indicate "0".

1

15. Completion Rate

This is a calculated field based on #14 and #13.

14.28571

16. 150% Graduates?

2

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

**28.57143**

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

19. Graduates Available for Employment \*

If none, indicate "0".

**2**

20. Graduates Employed in the Field

\*

If none, indicate "0".

**0**

21. Placement Rate

This is a calculated field based on #17 and #18.

**0**

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week \*

If none, indicate "0".

**0**

22b. at least 30 hours per week \*

If none, indicate "0".

**0**

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study \*

If none, indicate "0".

**0**

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \*

If none, indicate "0".

**0**

23c. Freelance/self-employed \*

If none, indicate "0".

**0**

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \*

If none, indicate "0".

**0**

## Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

---

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

---

Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

---

Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following**

**Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

---

**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**2**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**0**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

---

\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>0</b>	<b>0</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>0</b>	<b>0</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>0</b>	<b>0</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>0</b>	<b>0</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>0</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>0</b>	<b>0</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>0</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

#### 2024 BPPE Annual Report - Program - Institution Data

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**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Paralegal Studies (Distance Education)**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Associate**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

**8**

9. Total Charges for this Program \*

**\$39,087.00**

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

**81**

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

**86**

12. Number of Students Who Began the Program \*

If none, indicate "0".

**30**

13. Number of Students Available for Graduation \*

If none, indicate "0".

**30**

14. Number of On-time Graduates \*

If none, indicate "0".

**7**

15. Completion Rate

This is a calculated field based on #14 and #13.

**23.33333**

16. 150% Graduates?

8

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

26.66667

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

19. Graduates Available for Employment \*

If none, indicate "0".

**8**

20. Graduates Employed in the Field

\*

If none, indicate "0".

**7**

21. Placement Rate

This is a calculated field based on #17 and #18.

**87.5**

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week \*

If none, indicate "0".

**0**

22b. at least 30 hours per week \*

If none, indicate "0".

**7**

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study \*

If none, indicate "0".

**7**

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \*

If none, indicate "0".

**0**

23c. Freelance/self-employed \*

If none, indicate "0".

**1**

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \*

If none, indicate "0".

**0**

## Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

---

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

---

Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

---

Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

---

**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**8**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**7**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

---

\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>0</b>	<b>0</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>1</b>	<b>2</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>0</b>	<b>0</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>1</b>	<b>2</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>0</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>0</b>	<b>0</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>1</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>0</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

---

**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

---

Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

---

4. Name of Program \*

**Massage Therapy**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Diploma/Certificate**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)  
 Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

**14**

9. Total Charges for this Program \*

**\$19,673.00**

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

**84**

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

**93**

12. Number of Students Who Began the Program \*

If none, indicate "0".

**17**

13. Number of Students Available for Graduation \*

If none, indicate "0".

**17**

14. Number of On-time Graduates \*

If none, indicate "0".

**13**

15. Completion Rate

This is a calculated field based on #14 and #13.

**76.47059**

16. 150% Graduates?

**14**

**17. 150% Completion Rate**  
This is a calculated field based on  
#16 and #13.

**82.35294**

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

**No**

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

**Checked**

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

**19. Graduates Available for Employment \***

If none, indicate "0".

**12****20. Graduates Employed in the Field****\***

If none, indicate "0".

**9****21. Placement Rate**

This is a calculated field based on #17 and #18.

**75****22. Graduates employed in the field...****22a. 20 to 29 hours per week \***

If none, indicate "0".

**6****22b. at least 30 hours per week \***

If none, indicate "0".

**3****23. Indicate the number of graduates employed...****23a. In a single position in the field of study \***

If none, indicate "0".

**9****23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \***

If none, indicate "0".

**0****23c. Freelance/self-employed \***

If none, indicate "0".

**3****23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \***

If none, indicate "0".

**0**

## Allied Health

### 2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

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Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

---

26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

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Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

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**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**12**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**9**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

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\$0 - \$5,000 *	0	\$5,001 - \$10,000 *	0
\$10,001 - \$15,000 *	0	\$15,001 - \$20,000 *	1
\$20,001 - \$25,000 *	2	\$25,001 - \$30,000 *	0
\$30,001 - \$35,000 *	0	\$35,001 - \$40,000 *	1
\$40,001 - \$45,000 *	3	\$45,001 - \$50,000 *	1
\$50,001 - \$55,000 *	0	\$55,001 - \$60,000 *	0
\$60,001 - \$65,000 *	1	\$65,001 - \$70,000 *	0
\$70,001 - \$75,000 *	0	\$75,001 - \$80,000 *	0

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>0</b>	

## Institution Information



# Bureau for Private Postsecondary Education Department of Consumer Affairs

## 2024 Annual Report

### Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

## 2024 BPPE Annual Report - Program - Institution Data

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**Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit one Program Data Workflow for the program being reported.**

1. Report Year \*

**2024**

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

**1915961**

3. Institution Name (auto-populated) \*

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

**Fremont University**

## Program Name

# 2024 BPPE Annual Report - Program - Program Name

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Display Instructions for #4 - #7 (Toggle)

**Checked**

## Instructions

[\(Printer Friendly Annual Report Instructions Document\)](#)

**4. Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting.

**5. Program Level?** Indicate the academic level of the program you are entering, (e.g., Doctorate, Master, Bachelor, Associate, diploma/certificate or other.) If you indicate 'Other', please enter the Program Level in #5a.

**6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.** Select from the dropdown list the code that most accurately corresponds to the educational program.

**7. Select all Standard Occupational Classification (SOC) Codes that apply to this program.** Select all applicable codes from the dropdown list.

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4. Name of Program \*

**Sports & Rehabilitation Therapy**

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. \*

**Associate**

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

## Financial and Graduation

# 2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Checked

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

**8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year?** "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

**9. Total Charges for this program?** Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are required for participation in the educational program.

**10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program.** Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

**11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program.** Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

**12. Number of Students Who Began the Program?** Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

**13. Students Available for Graduation?** Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

**14. On-Time Completion?** Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

**15. Completion Rate?** Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

**16. 150% Graduates?** Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(l)).

**17. 150% Completion Rate?** If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(l)).

**18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?** Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

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8. Number of Degrees, Diplomas or

Certificates Awarded \*

If none, indicate "0".

**11**

9. Total Charges for this Program \*

**\$38,320.00**

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program \*

**73**

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program \*

**83**

12. Number of Students Who Began the Program \*

If none, indicate "0".

**15**

13. Number of Students Available for Graduation \*

If none, indicate "0".

**14**

14. Number of On-time Graduates \*

If none, indicate "0".

**11**

15. Completion Rate

This is a calculated field based on #14 and #13.

**78.57143**

16. 150% Graduates?

11

17. 150% Completion Rate  
This is a calculated field based on  
#16 and #13.

**78.57143**

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? \*

No

## Placement Data

### 2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Checked

#### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC § 94929.5 requires institution report placement data for every program that is designed or advertised to lead to a particular career, or advertised or promoted with any claim regarding job placement.**

**19. Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the reporting year minus the number of graduates that either died, became incarcerated, were called to active military duty, were international students that left the United States or did not have a visa allowing employment in the United States or, are continuing their education in an accredited or bureau-approved postsecondary institution (CEC §94928(d) & (f)).

**20. Graduates Employed in the Field?** Of the Graduates Available for Employment (#19 above), provide the number of graduates employed in the field, who are gainfully employed in a single position for which the institution represents the program prepares its graduates within six months after a student completes the applicable educational program. For occupations for which the state requires passing an examination, the period of employment shall begin within six months of the announcement of the examination results for the first examination available after a student completes an applicable educational program (CEC §94928(e)).

**21. Placement Rate?** Divide the number of graduates employed in the field (#20 above) divided by the number of graduates available for employment (#19 above.) **A “rate” is a percentage and should never be more than 100%** (5 CCR §74112(i)(4)).

**19. Graduates Available for Employment \***

If none, indicate "0".

**11****20. Graduates Employed in the Field****\***

If none, indicate "0".

**8****21. Placement Rate**

This is a calculated field based on #17 and #18.

**72.72727****22. Graduates employed in the field...****22a. 20 to 29 hours per week \***

If none, indicate "0".

**5****22b. at least 30 hours per week \***

If none, indicate "0".

**3****23. Indicate the number of graduates employed...****23a. In a single position in the field of study \***

If none, indicate "0".

**8****23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) \***

If none, indicate "0".

**0****23c. Freelance/self-employed \***

If none, indicate "0".

**2****23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution \***

If none, indicate "0".

**0**

## Allied Health

### 2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)

**Checked**

## Instructions

([Printer Friendly Annual Report Instructions Document](#))

\*Questions #24 - #25 are specific to Allied Health Professionals requiring clinical training.

If the institution does not offer educational programs for these specific allied health professions, requiring clinical training, skip this workflow.

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training?**

If "yes," for each program offered, select the allied health profession, requiring clinical training. Professions include: Licensed Vocational Nurse, Medical Assistant, Occupational Therapy Aide, Radiologic Technologist, Respiratory Care Therapist, Pharmacy Technician and Technologist, Surgical Technician and Technologist programs Cardiovascular Technologist, Certified Nurse Assistant, Dialysis Technician, Diagnostic Medical Sonographer, Medical Lab Technician, Orthopedic Assistant, Physical Therapy Aide and Assistant, Psychiatric Technologist, Radiologic Therapist, Speech Language Pathology Aide. The program selected must be the same program selected at #4 listed above.

#### **24b.**

**Enter the name(s) of clinical site(s).**

**Enter the License Number or Employer Identification Number to the corresponding site.**

**Enter Program Name.**

**Enter Total Number of students enrolled in this program.**

**Enter Number of Students Proficient in languages other than English.**

### **25. For each clinical site, indicate whether any donations, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit or other organization, clinic, hospital, or other location where the student was placed. Enter the Site Name, Donation or Compensation Amount and Type of Consideration. If multiple there are Sites for this program, select "Add Row" for Site.**

### **24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? \***

**No**

## Exam Passage Rate

## 2024 BPPE Annual Report - Program - Exam Passage Rate

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Display Instructions for #26 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94929.5(a)(2) requires the institution to report two years of exam passage data for graduates taking the exam for the first time that the examination is available after completion of the educational program. The exam passage data should be as reported by the appropriate state agency.**

**5 CCR §74112(j) requires the institution to collect the exam passage data directly from its graduates if the exam passage data is not available from the licensing agency.**

**26. Does this educational program lead to an occupation that requires State licensing?** If "Yes" please enter the name of the licensing entity that licenses this field. If "No", you may skip to "Salary Data".

**26a. Do graduates have the option or requirement for more than one type of State licensing exam?** If "Yes" provide the name(s) of the other licensing exam options or requirements.

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26. Does this educational program lead to an occupation that requires State licensing? \*

**No**

You have indicated "No" for question #22, please proceed to 'Salary Data'.

### Salary Data

## 2024 BPPE Annual Report - Program - Salary Data

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Display Instructions for #43-45 (Toggle)

**Checked**

### Instructions

([Printer Friendly Annual Report Instructions Document](#))

**CEC §94910(d) and 94929.5(a)(3) require the reporting of salary and wage information in increments of \$5,000.00 for graduates employed in the field.**

**43. Graduates Available for Employment?** Indicate number of graduates (#19 above) (CEC §94928(d), (f), and 5 CCR §74112(l)).

**44. Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#20 above) (CEC §94928(e), and 5 CCR §74112(l)).

**45. Graduates Employed in the Field Reported receiving the following**

**Salary or Wage:** Enter the number of graduates employed in the field reporting to receive the annual salary between the lowest number indicated and the highest number indicated. Example: If one student reports that they are receiving \$4,010 a year and a second student reports they are receiving \$2,999 a year, enter the number "2" in the space next to \$0 - \$5,000, because there are 2 students who are receiving between \$0-\$5,000 a year.

---

**43. Graduates Available for Employment**

This field is auto-populated based on your entry in #17.

**11**

**44. Graduates Employed in the Field**

This field is auto-populated based on your entry in #18.

**8**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

---

\$0 - \$5,000 *	\$5,001 - \$10,000 *
<b>0</b>	<b>0</b>
\$10,001 - \$15,000 *	\$15,001 - \$20,000 *
<b>0</b>	<b>0</b>
\$20,001 - \$25,000 *	\$25,001 - \$30,000 *
<b>1</b>	<b>1</b>
\$30,001 - \$35,000 *	\$35,001 - \$40,000 *
<b>2</b>	<b>1</b>
\$40,001 - \$45,000 *	\$45,001 - \$50,000 *
<b>2</b>	<b>1</b>
\$50,001 - \$55,000 *	\$55,001 - \$60,000 *
<b>0</b>	<b>0</b>
\$60,001 - \$65,000 *	\$65,001 - \$70,000 *
<b>0</b>	<b>0</b>
\$70,001 - \$75,000 *	\$75,001 - \$80,000 *
<b>0</b>	<b>0</b>

\$80,001 - \$85,000 *	\$85,001 - \$90,000 *
<b>0</b>	<b>0</b>
\$90,001 - \$95,000 *	\$95,001 - \$100,000 *
<b>0</b>	<b>0</b>
Over \$100,000 *	
<b>0</b>	