

FORM **IPEDS-IC**
(6-1-96)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR THE
U.S. DEPARTMENT OF EDUCATION
NATIONAL CENTER FOR EDUCATION STATISTICS

**INTEGRATED POSTSECONDARY
EDUCATION DATA SYSTEM**

**INSTITUTIONAL
CHARACTERISTICS SURVEY**

1996-97

NOTE - The completion of this survey, in a timely and accurate manner, is **MANDATORY** for all institutions which participate or are applicants for participation in any Federal financial assistance program authorized by Title IV of the Higher Education Act of 1965, as amended. The completion of this survey is mandated by 20 U.S.C. 1094(a)(17).

For those institutions not required to complete this survey on the basis of the above requirements, the completion of this survey is voluntary and authorized by P.L. 103-382, National Education Statistics Act of 1994, Sec. 404(a).



139463-02

Please read the accompanying instructions before completing this survey form. Respond to each item on this report in the space provided. Certain responses are preprinted. These responses were provided by your institution on the previous IPEDS Institutional Characteristics Survey form. If a response is preprinted, verify that it is correct. If a preprinted response is incorrect, cross out the existing incorrect response with a single line and clearly indicate the correct response.

Make your changes in red so they are easily identified. Be sure to update the enrollment and tuition questions. Certain terms are defined in the glossary which begins on page 5 of the instructions.

If there are any questions about this form, contact a Bureau of the Census IPEDS representative at (800) 451-6236 or FAX number (301) 457-1542, 7:30 a.m.—4:30 p.m. EST.

RETURN TO

JOSEPH J. SZUTZ
OFFICE OF PLANNING & POLICY ANALYSIS
BOARD OF REGENTS OF UNIV. SYSTEM OF GEORGIA
244 WASHINGTON STREET, SW
ATLANTA, GA 30334
404-656-2213

Date due: September 1, 1996

Mailing address — If IPEDS forms should be mailed to an address that is not the school location, complete the following information.

Name of institution

Street or PO Box

City

State

ZIP Code

INSTITUTIONAL IDENTIFICATION 1996-97

Please correct errors in the name, address, ZIP Code, and other information listed below.

1. Name of institution covered by this report

DALTON COLLEGE

2. UNITID

139463

Mark (X) this box if mailing address is the same as the institution's physical location.
3. Physical location of institution (Number and street name)

213 N COLLEGE DR

**4. Employer ID Number (EIN)
(9 digits)**

58-0975068

City

DALTON

State

GA

ZIP Code

30720

5. Name of county or independent city

WHITFIELD

6. Name of chief administrator

JAMES A BURRAN

Title

PRESIDENT

7. Congressional district

09

8. Name of respondent

Ginger Marine

9. E-Mail address

gmarine@cupet.dalton.peachnet.edu

10. Telephone numbers

Respondent's

(706) 272-4406

FAX

(706) 272-4588

Financial aid office

(706) 272-4545

Admissions office

(706) 272-4436

General information

(706) 272-4436

**Changes from the 1995-96 form for
1996-97 INSTITUTIONAL CHARACTERISTICS SURVEY**

The Institutional Characteristics (IC) survey form for 1996-97 is the full version of the form and is similar to the 1994-95 survey.

▶ **Part A — Type of Educational Offerings**

Included in this version for alternate years.

▶ **Part B — Organization and Accreditation**

All questions are included in this version for alternate years. Revised list of recognized accredited agencies and associations.

▶ **Part C — Calendar, Admission Requirements, and Services**

Included for alternate years. Request average score required for admission on the SAT and ACT.

▶ **Part D — Student Charges for Academic Year 1996-97**

No changes this year.

▶ **Part E — Enrollment and Instructional Activity**

Includes activity for the 12-month period, summer and extension division/program. Unduplicated counts for summer session(s) and extension divisions are collected by level.

▶ **Part F — Additional Information**

All questions included in this version for alternate years. Added question on athletic aid.

PURPOSE OF THE SURVEY AND WHO SHOULD RESPOND

The primary purpose of the Institutional Characteristics (IC) component of IPEDS is to collect the basic data that identify and describe the universe of postsecondary education institutions in the United States and its outlying areas. Each institution or branch campus should file a separate report so that they can be listed in the Directory of Postsecondary Institutions.

USES OF THE DATA

Survey results will be used in a variety of ways. For example, they will be used as the source file for sample design for other postsecondary data collection activities. Other uses include generating basic counts of institutions in each State by type, control, and other key institutional characteristics; compiling directories of postsecondary education institutions that will be made available to the general public; and incorporating results into Career Information Delivery Systems throughout the nation. The data are extremely valuable for survey research design, statistical analysis, and general information purposes.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0582. The time required to complete this information collection is estimated to vary from 30 minutes to 2.0 hours per response, with an average of 1 hour, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Information Management Team, Washington, DC 20202-4652. **If you have any comments or concerns regarding the status of your individual submission of this form, write directly to:**

**National Center for Education Statistics/IPEDS
U.S. Department of Education
555 New Jersey Avenue, NW
Washington, DC 20208-5652**

The definitions and instructions for compiling IPEDS data have been designed to minimize comparability problems. However, postsecondary education institutions differ widely among themselves. As a result of these differences, comparisons of data provided by individual institutions may be misleading.

DO NOT RETURN INSTRUCTIONS

REMARKS SECTION — Please enter any remarks you may have in this section. By entering any explanations here, you may eliminate the need for telephone contact at a later date.

Part A — TYPES OF EDUCATIONAL OFFERINGS

IC

Which of the following types of instruction/programs does your institution offer?
 Mark (X) all that apply.

- 1 Occupational, may lead to a certificate, degree, or other formal award
- 2 Academic, leading to a certificate, degree, or diploma
- 3 Continuing professional (postbaccalaureate only)
- 4 Recreational or avocational (leisure) programs
- 5 Adult basic or remedial instruction or high school equivalency
- 6 Secondary (high school)

If you marked ONLY items 4, 5, or 6 above, please stop and return the form to the address printed on the front of the form.

Part B — ORGANIZATION AND ACCREDITATION

1. Will your institution complete IPEDS forms for OTHER institutions or branch campuses?

- 1 Yes — List the information requested below for those institutions.
- 2 No — SKIP to item 2

| UNITID | Institution name | Address | City | State | ZIP Code |
|--------|------------------|---------|------|-------|----------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

A SEPARATE survey form should also be completed for each institution or branch listed above.

Part B — ORGANIZATION AND ACCREDITATION — Continued

IC

2. What is your institutional control or affiliation? (Do not indicate both public and private.)

PUBLIC

Mark (X) only one.

- 1 Federal
- 2 State
- 3 Territorial
- 4 School district
- 5 County
- 6 Township
- 7 City
- 8 Special district
- 9 Other — Specify z

PRIVATE

Mark (X) all that apply but do not indicate both profit-making and nonprofit.

- 1 Profit-making — SKIP to question 3
- 2 Nonprofit z
 - a Independent (no religious affiliation) — SKIP to question 3
 - b Religious affiliation z
 - 1 Catholic
 - 2 Jewish
 - 3 Protestant — Specify z

4 Other — Specify z

CENSUS
USE ONLY

3. What award levels are offered by your institution? (One academic year equals 30 semester credit hours or its equivalent, or 900 contact or clock hours.)

Mark (X) all that apply.

BELOW THE BACCALAUREATE

- 1 Postsecondary award, certificate, or diploma of less than one academic year (less than 900 contact or clock hours)
- 2 Postsecondary award, certificate, or diploma of at least one but less than two academic years (at least 900 but less than 1800 contact or clock hours)
- 3 Associate's Degree
- 4 Postsecondary award, certificate, or diploma of at least two but less than four academic years (at least 1800 but less than 3600 contact or clock hours)

BACCALAUREATE AND ABOVE

- 5 Bachelor's Degree
- 6 Postbaccalaureate Certificate
- 7 Master's Degree
- 8 Post-Master's Certificate
- 9 Doctor's Degree
- 10 First-Professional Degree
- 11 First-Professional Certificate (Post-Degree)

12 Other — Specify → _____

Part B — ORGANIZATION AND ACCREDITATION — Continued

IC

An administrative unit is the office in a **multi-campus** environment responsible for the completion of the IPEDS survey forms for the campuses (main and branch) of the school. An administrative unit conducts no classes. Mark (X) the box below if the entity covered by this form and named in item 1 on the front cover is an administrative unit only.

- 1 — **If this is an administrative unit only, STOP HERE, make sure you have completed pages 1—5, and return this form to the address shown on page 1. Complete a separate survey form for each campus for which you are responsible.**

NOTE — The administrative office for a one-campus school is NOT considered an administrative unit for IPEDS reporting purposes.

4. Does this institution offer any formally organized programs (either academic or occupational) with well defined completion requirements that do not lead to a formal award?

- 1 Yes — *Specify* —————> a Undergraduate
b Graduate

2 No

5. This institution is accrediting by the following accrediting agency(ies). Mark (X) all that apply.

- 1 National institutional or specialized accrediting agency
2 Regional accrediting agency — *Please complete question 6.*
3 State accrediting or approval agency
4 Not applicable

6. If you marked (X) box 2 in question 5 above — Indicate below the regional association that accredits your institution. (Mark (X) only one.)

- | | |
|---|--|
| 1 <input type="checkbox"/> Middle States Association of Colleges and Schools, Commission on Higher Education | 7 <input type="checkbox"/> Northwest Association of Schools and Colleges, Commission on Colleges |
| 2 <input type="checkbox"/> Middle States Association of Colleges and Schools, Commission on Secondary Schools | 8 <input checked="" type="checkbox"/> Southern Association of Colleges and Schools, Commission on Colleges |
| 3 <input type="checkbox"/> New England Association of Schools and Colleges Commission on Institutions of Higher Education | 9 <input type="checkbox"/> Western Association of Schools and Colleges, Accrediting Commission for Community and Junior Colleges |
| 4 <input type="checkbox"/> New England Association of Schools and Colleges Commission on Vocational, Technical, Career Institutions | 10 <input type="checkbox"/> Western Association of Schools and Colleges, Accrediting Commission for Schools |
| 5 <input type="checkbox"/> North Central Association of Colleges and Schools, Commission on Institutions of Higher Education | 11 <input type="checkbox"/> Western Association of Schools and Colleges, Accrediting Commission for Senior Colleges and Universities |
| 6 <input type="checkbox"/> North Central Association of Colleges and Schools, Commission on Schools | |

7. Is this institution or any of its programs, departments, or schools currently accredited by any of the accrediting agencies recognized by the Secretary, U.S. Department of Education, which are listed on pages 7—9?

- 1 Yes — *Continue with Part B on page 7 and mark (X) all that apply.*
2 No — *SKIP to Part C on page 10.*

**LIST OF NATIONAL INSTITUTIONAL AND SPECIALIZED ACCREDITING BODIES
RECOGNIZED BY THE SECRETARY, U.S. DEPARTMENT OF EDUCATION**

IC

Review the following list of National Institutional and Specialized Accrediting Bodies and mark (X) all that apply for your institution. Be sure to review the entire list.

ACCREDITATION BOARD FOR ENGINEERING AND TECHNOLOGY, INC.

- 001 **Engineering (ENG)** — Basic (baccalaureate) and advanced (master's) level programs in engineering
- 102 **Engineering-related (ENGR)** — Engineering-related programs at the baccalaureate and advanced degree level
- 002 **Engineering Technology (ENGT)** — Associate and baccalaureate degree programs in engineering technology

ACCREDITING ASSOCIATION OF BIBLE COLLEGES

- 011 **Bible College Education (BI)** — Bible colleges and institutes offering undergraduate programs

ACCREDITING BUREAU OF HEALTH EDUCATION SCHOOLS

- 005 **Allied Health Education (AHE)** — Private, postsecondary institutions
- 003 **Medical Assistant Education (MAAB)** — Private schools and programs
- 004 **Medical Laboratory Technician Education (MLTAB)** — Private schools and programs

ACCREDITING COMMISSION OF CAREER SCHOOLS AND COLLEGES OF TECHNOLOGY

- 086 **Occupational Education (NATTS)** — Private postsecondary degree-granting institutions that are predominately organized to educate students for trade, occupational, or technical careers
- 087 **Occupational Education (NDNAT)** — Private nondegree-granting institutions that are predominately organized to educate students for trade, occupational, or technical careers

ACCREDITING COMMISSION ON EDUCATION FOR HEALTH SERVICES ADMINISTRATION

- 006 **Health Services Administration (HSA)** — Graduate programs in health services administration

ACCREDITING COUNCIL FOR CONTINUING EDUCATION AND TRAINING

- 099 **Continuing Education (CNCE)** — Noncollegiate continuing education institutions and programs

ACCREDITING COUNCIL FOR INDEPENDENT COLLEGES AND SCHOOLS

- 068 **Business (JRCB)** — Private junior colleges
- 069 **Business (SRCB)** — Private senior colleges
- 070 **Business (PPB)** — Private postsecondary schools

ACCREDITING COUNCIL ON EDUCATION IN JOURNALISM AND MASS COMMUNICATIONS

- 007 **Journalism and Mass Communications (JOUR)** — Units within institutions offering professional undergraduate and graduate (master's) degree programs

AMERICAN ACADEMY FOR LIBERAL EDUCATION

- 116 **Liberal Education (LBRL)** — Institutions of higher education and programs within institutions of higher education that offer liberal arts degree(s) at the baccalaureate level or a documented equivalency

AMERICAN ASSOCIATION FOR MARRIAGE AND FAMILY THERAPY

- 012 **Marriage and Family Therapy (MFCC)** — Clinical training programs
- 013 **Marriage and Family Therapy (MFCD)** — Graduate degree programs

AMERICAN ASSOCIATION OF NURSE ANESTHETISTS

- 014 **Nurse Anesthesia (ANEST)** — Generic nurse anesthesia educational programs/schools

AMERICAN BAR ASSOCIATION

- 015 **Law (LAW)** — Professional schools

AMERICAN BOARD OF FUNERAL SERVICE EDUCATION

- 016 **Funeral Service Education (FUSER)** — Institutions and programs awarding diplomas, associate degrees, and bachelor's degrees

AMERICAN COLLEGE OF NURSE-MIDWIVES

- 017 **Nurse Midwifery (MIDWF)** — Basic certificate and basic master's degree programs

AMERICAN COUNCIL ON PHARMACEUTICAL EDUCATION

- 018 **Pharmacy (PHAR)** — Professional degree programs

AMERICAN DENTAL ASSOCIATION

- 019 **Dental Assisting (DA)**
- 020 **Dental Hygiene (DH)**
- 021 **Dental Technology (DT)**
- 022 **Dentistry (DENT)** — Programs leading to the D.D.S. or D.M.D. degree, advanced general dentistry and specialty programs, and general practice residency programs

AMERICAN DIETETIC ASSOCIATION, THE

- 023 **Dietetics (DIET)** — Coordinated undergraduate programs
- 024 **Dietetics (DIETI)** — Postbaccalaureate dietetic internship programs

AMERICAN LIBRARY ASSOCIATION

- 025 **Librarianship (LIB)** — Master's programs leading to the first professional degree

AMERICAN MEDICAL ASSOCIATION AND ASSOCIATION OF AMERICAN MEDICAL COLLEGES, LIAISON COMMITTEE ON MEDICAL EDUCATION, COUNCIL ON MEDICAL EDUCATION

- 078 **Medicine (MED)** — Programs leading to the M.D. degree

CONTINUED ON NEXT PAGE

**LIST OF NATIONAL INSTITUTIONAL AND SPECIALIZED ACCREDITING BODIES
RECOGNIZED BY THE SECRETARY, U.S. DEPARTMENT OF EDUCATION — Continued**

IC

Mark (X) all that apply for your institution.

**AMERICAN MEDICAL ASSOCIATION, COMMITTEE ON
ALLIED HEALTH EDUCATION AND ACCREDITATION**

- 028 **Cytotechnologist (CYTO)**
- 029 **Diagnostic Medical Sonographer (DMS)**
- 030 **Electroneurodiagnostic Technologist (ENDT)**
- 031 **Emergency Medical Technician-Paramedic (EMTP)**
- 032 **Histologic Technician/Technologist (HT)**
- 033 **Medical Assistant (MA) — One- and two-year programs**
- 035 **Medical Laboratory Technician (MLTC) — Certificate programs**
- 034 **Medical Laboratory Technician (MLTAD) — Associate degree**
- 036 **Medical Record Administrator (MRA)**
- 037 **Medical Record Technician (MRT)**
- 038 **Medical Technologist (MT) — Professional programs**
- 039 **Nuclear Medicine Technologist (NMT)**
- 041 **Occupational Therapist (OT) — Professional programs**
- 040 **Ophthalmic Medical Assistant (OMA) — Programs of 6 months or longer**
- 042 **Perfusionist (PERF)**
- 026 **Physician Assistant (PA)**
- 046 **Radiation Therapy Technologist (RADTT)**
- 043 **Radiographer (RAD)**
- 044 **Respiratory Therapist (REST)**
- 045 **Respiratory Therapy Technician (RESTT)**
- 027 **Specialist in Blood Bank Technology (SBBT)**
- 047 **Surgeon's Assistant (SA)**
- 048 **Surgical Technologist (ST)**

AMERICAN OPTOMETRIC ASSOCIATION

- 051 **Optometry (OPTT) — Technician programs**
- 049 **Optometry (OPT) — Professional degree programs**
- 050 **Optometry (OPTR) — Residency programs**

AMERICAN OSTEOPATHIC ASSOCIATION

- 052 **Osteopathic Medicine (OSTEO) — Programs leading to the D.O. degree**

AMERICAN PHYSICAL THERAPY ASSOCIATION

- 054 **Physical Therapy (PTAA) — Programs for the physical therapist assistant**
- 053 **Physical Therapy (PTA) — Professional programs for the physical therapist**

AMERICAN PODIATRIC MEDICAL ASSOCIATION

- 055 **Podiatry (POD) — Colleges of podiatric medicine, including first-professional and graduate degree programs**

AMERICAN PSYCHOLOGICAL ASSOCIATION

- 056 **Clinical Psychology (CLPSY) — Doctoral programs**
- 057 **Counseling Psychology (COPSY) — Doctoral programs**
- 058 **Professional Psychology (IPSY) — Predoctoral internship programs**

**AMERICAN PSYCHOLOGICAL ASSOCIATION —
Continued**

- 059 **Professional/Scientific Psychology (PSPSY) — Doctoral programs**
- 060 **School Psychology (SCPSY) — Doctoral programs**

AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION

- 062 **Audiology (AUD) — Master's degree programs**
- 063 **Speech-Language Pathology (SP) — Master's degree programs**

AMERICAN VETERINARY MEDICAL ASSOCIATION

- 065 **Veterinary Medicine (VET) — Colleges of veterinary medicine offering programs leading to a professional degree**

ASSOCIATION FOR CLINICAL PASTORAL EDUCATION, INC.

- 066 **Pastoral Education (PAST) — Basic, advanced, and supervisory clinical pastoral education programs**

**ASSOCIATION OF ADVANCED RABBINICAL AND
TALMUDIC SCHOOLS**

- 067 **Rabbinical and Talmudic Education (RABN) — Advanced Rabbinical and Talmudic schools**

**ASSOCIATION OF COLLEGIATE BUSINESS SCHOOLS
AND PROGRAMS**

- 111 **Business (BUAD) — Associate degree programs in business and business-related fields**
- 112 **Business (BUBD) — Baccalaureate degree programs in business and business-related fields**
- 113 **Business (BUMD) — Master's degree programs in business and business-related fields**

**ASSOCIATION OF THEOLOGICAL SCHOOLS IN THE
UNITED STATES AND CANADA**

- 071 **Theology (THEOL) — Freestanding schools, as well as schools affiliated with larger institutions, offering graduate professional education for ministry and graduate study of theology**

COMMISSION ON OPTICIANRY ACCREDITATION

- 096 **Opticianry (OPLT) — 1-year programs for the ophthalmic laboratory technician**
- 095 **Opticianry (OPD) — 2-year programs for the ophthalmic dispenser**

COUNCIL ON CHIROPRACTIC EDUCATION, THE

- 072 **Chiropractic (CHIRO) — Programs leading to the D.C. degree**

COUNCIL ON EDUCATION FOR PUBLIC HEALTH

- 073 **Community Health Education (CHE) — Graduate programs offered outside schools of public health**

CONTINUED ON NEXT PAGE

**LIST OF NATIONAL INSTITUTIONAL AND SPECIALIZED ACCREDITING BODIES
RECOGNIZED BY THE SECRETARY, U.S. DEPARTMENT OF EDUCATION — Continued**

IC

Mark (X) all that apply for your institution.

**COUNCIL ON EDUCATION FOR PUBLIC HEALTH —
Continued**

074 **Community Health/Preventive Medicine (CHPM)** — Graduate programs offered outside schools of public health

075 **Public Health (PH)** — Graduate schools of public health

COUNCIL ON NATUROPATHIC MEDICAL EDUCATION

100 **Naturopathy (NATUR)** — Programs leading to the N.D. or N.M.D. degree

COUNCIL ON OCCUPATIONAL EDUCATION

118 **Occupational Education (OCED)** — Occupational education programs (formerly Commission on Occupational Education Institutions of the Southern Association of Colleges and Schools)

DISTANCE EDUCATION AND TRAINING COUNCIL

089 **Distance Education and Training (DIST)** — Home study schools (including associate, baccalaureate, or master's degree-granting home study schools)

FOUNDATION FOR INTERIOR DESIGN EDUCATION RESEARCH

077 **Interior Design (FIDER)** — 2-year pre-professional assistant level programs (certificate and associate degree); first professional degree level programs (master's and baccalaureate degrees and 3-year certificate); and postprofessional master's degree programs

**MONTESSORI ACCREDITATION COUNCIL FOR TEACHER
EDUCATION**

117 **Montessori Education (MONTE)** — Montessori teacher education programs and institutions

**NATIONAL ACCREDITATION COMMISSION FOR SCHOOLS
AND COLLEGES OF ACUPUNCTURE AND ORIENTAL
MEDICINE**

104 **Acupuncture (ACUP)** — First professional master's degree and professional master's level certificate and diploma programs in acupuncture and oriental medicine

**NATIONAL ACCREDITING COMMISSION OF
COSMETOLOGY ARTS AND SCIENCES**

080 **Cosmetology (COSME)** — Postsecondary schools and departments

NATIONAL ARCHITECTURAL ACCREDITING BOARD, INC.

081 **Architecture (ARCH)** — First professional degree programs

**NATIONAL ASSOCIATION OF SCHOOLS OF ART AND
DESIGN**

082 **Art and Design (ART)** — Degree-granting schools and departments and nondegree-granting schools

NATIONAL ASSOCIATION OF SCHOOLS OF DANCE

083 **Dance (DANCE)** — Institutions and units within institutions offering degree-granting and nondegree-granting programs

NATIONAL ASSOCIATION OF SCHOOLS OF MUSIC

084 **Music (MUS)** — Baccalaureate and graduate degree programs

105 **Music (MUSA)** — Community and junior college programs

106 **Music (MUSN)** — Nondegree programs

NATIONAL ASSOCIATION OF SCHOOLS OF THEATER

085 **Theater (THEA)** — Institutions and units within institutions offering degree-granting and/or nondegree-granting programs

**NATIONAL COUNCIL FOR ACCREDITATION OF TEACHER
EDUCATION**

088 **Teacher Education (TED)** — Baccalaureate and graduate programs for the preparation of teachers and other professional personnel for elementary and secondary schools

**NATIONAL ENVIRONMENTAL HEALTH SCIENCE AND
PROTECTION ACCREDITING COUNCIL**

115 **Environment Health Science and Protection (EHSP)** — Programs leading to a baccalaureate or higher degree

NATIONAL LEAGUE FOR NURSING, INC.

093 **Nursing (PNUR)** — Practical nursing programs

090 **Nursing (ADNUR)** — Associate degree programs

091 **Nursing (DNUR)** — Diploma programs

092 **Nursing (NUR)** — Baccalaureate and higher degree programs

**TRANSNATIONAL ASSOCIATION OF CHRISTIAN COLLEGES
AND SCHOOLS**

114 **Christian Education (CE)** — Christian postsecondary institutions that offer certificates, diplomas, associate, baccalaureate, and graduate degrees

UNITED STATES CATHOLIC CONFERENCE

101 **Pastoral Education (CPE)** — Centers/programs, including those that offer clinical pastoral education, that award certificates, baccalaureate, and master's degrees for training for specialized ministries in the Catholic Church

OTHER

**NEW YORK STATE BOARD OF REGENTS (A nationally
recognized State agency)**

110 Accreditation of collegiate degree-granting programs or curriculums offered by institutions of higher education and of credit-bearing certificate and diploma programs offered by degree-granting institutions of higher education

Part C — CALENDAR, ADMISSION REQUIREMENTS, AND SERVICES

IC

1. What is the predominant calendar system at this institution? — Mark (X) only one.

- 1 Semester
- 2 Quarter
- 3 Trimester
- 4 Four-One-Four Plan (4-1-4)
- 5 Differs by program
- 6 Continuous basis (every 2 weeks, monthly, or other period) — Specify period

7 Other — Specify

2. Mark (X) below all locations where credit/noncredit courses are offered.

CREDIT

- 1 In-State
- 2 Out-of-State
- 3 Abroad

NONCREDIT

- 4 In-State
- 5 Out-of-State
- 6 Abroad

3. Mark (X) below all facilities where credit/noncredit courses are offered.

CREDIT

- 1 On-campus
- 2 Correctional facility
- 3 Local educational agency facility
- 4 Other government facility
- 5 Other

NONCREDIT

- 6 On-campus
- 7 Correctional facility
- 8 Local educational agency facility
- 9 Other government facility
- 10 Other

4. Does your institution offer credit courses at military installations?

- 1 Yes — Mark (X) all that apply. —————>
 - a In States and/or territories
 - b Abroad
- 2 No

5. Which of the following data does your institution use as part of the selection process for entering freshmen? Mark (X) all that apply

- 1 No entering freshmen — SKIP to question 6
- 2 High school diploma or its equivalent
- 3 High school class standing
- 4 Admissions test scores — Specify
- 5 Residence
- 6 Evidence of ability to benefit from instruction
- 7 Age
- 8 Score on the Test of English as a Foreign Language (TOEFL) for foreign applicants or an equivalent test
- 9 Open admission
- 10 Other — Specify

| Average score (recentered) | |
|----------------------------|-----|
| a | 901 |
| b | 19 |

- a SAT
- b ACT
- c Other

Part C — CALENDAR, ADMISSION REQUIREMENTS, AND SERVICES — Continued

IC

6. If your institution grants a bachelor's degree or higher but does not offer a full 4-year program of study at the undergraduate level, how many years of completed college-level work are required for entrance?

Number of years

7. Which of the following selected modes of instruction in credit/noncredit activities does your institution offer?

Mark (X) all that apply.

CREDIT ACTIVITIES

- 1 Work in a program-related setting with pay
- 2 Work in a program-related setting without pay
- 3 Home study — Specify

- a Correspondence
- b Radio and TV
- c Newspaper

4 None of the above

NONCREDIT ACTIVITIES

- 5 Work in a program-related setting with pay
- 6 Work in a program-related setting without pay
- 7 Home study — Specify

- a Correspondence
- b Radio and TV
- c Newspaper

8 None of the above

8. Which of the following selected student services are offered by your institution?

Mark (X) all that apply.

- 1 Remedial services
- 2 Academic/career counseling services
- 3 Employment services for current students
- 4 Placement services for program completers
- 5 Assistance for the visually impaired

- 6 Assistance for the hearing impaired
- 7 Access for the mobility impaired
- 8 On-campus day care for children of students
- 9 None of the above

9. Does your institution have its own library or are you financially supporting a shared library with another postsecondary education institution?

- 1 Has own library
- 2 Does not have own library but contributes financial support to a shared library with the following postsecondary institution(s)

| UNITID | Name of institution |
|--------|---------------------|
| | |
| | |
| | |

3 None of the above

Remarks

Part D — STUDENT CHARGES FOR ACADEMIC YEAR 1996-97

IC

1. Is an application fee for admission required by your institution?

1 Yes — Indicate amount of fee _____

2 No

Undergraduate

Graduate

First Professional

Application fee

\$

\$

\$

2. Does your institution enroll any full-time students?

1 Yes — Continue with question 3.

2 No — SKIP to Part E on page 17

PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE PROCEEDING.

When reporting student charges information in the following section, please choose the appropriate METHOD(S) OF REPORTING, according to how you answer question 3.

Report charges by **PROGRAM**, if your institution is organized such that students enter into a particular program, and tuition and fees are assessed based on the program chosen. This method of reporting is particularly relevant to occupational and vocational programs. For example, a 1500 hour cosmetology program may cost \$2,500 for the **entire** program.

Report by **ACADEMIC YEAR**, if charges are assessed by credit hour, quarter, semester, trimester, or term. **NOTE** — These charges **must** be converted to ACADEMIC YEAR charges.

If your institution uses **both methods**, that is, for some vocational/occupational programs, charges are assessed by the program, while for academic programs, tuition and fees are charged by semester or term, then report **BOTH** ways.

- If you report by **PROGRAM** — Be sure to complete questions 4 through 6.
- If you report by **ACADEMIC YEAR** — Complete questions 7 through 9.
- If you report **BOTH WAYS** — Complete questions 4 through 9.

3. Do you charge full-time students by —

1 Credit hour

2 Term

3 Year

4 Program (normally measured in contact hours) — Provide **program** and tuition information in question 4—6.

5 Other — Specify _____

Provide **academic year** charges in questions 7—9 as appropriate.

— Provide charges as specified above using the most appropriate method.

Part D — STUDENT CHARGES FOR ACADEMIC YEAR 1996-97

IC

4. How many programs are offered at your institution?

Specify number _____ →

Number of programs

5. Does your institution offer any program of at least 300 contact or clock hours, or 6 semester or trimester hours, or 12 quarter hours?

- 1 Yes
- 2 No

6. If your institution charges by program — Please list the six programs with the LARGEST enrollment at your institution and provide the following information for each program. Report the tuition and fees and the cost of books and supplies for the TOTAL LENGTH OF THE PROGRAM. Follow the instructions carefully and refer to the enclosed pamphlet for CIP codes.

| TITLE OF PROGRAM | CIP CODE | TUITION AND REQUIRED FEES (For entire program) | COST OF BOOKS AND SUPPLIES | TOTAL LENGTH OF PROGRAM (In contact hours) |
|------------------|----------|---|----------------------------|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

If you report ONLY by program — SKIP to question 10, page 16.
If you report both ways — Continue with question 7.

Part D — STUDENT CHARGES FOR ACADEMIC YEAR 1996-97 — Continued

IC

NOTE

When answering questions 7-11 of Part D, a full academic year refers to the period of time generally extending from September to June; usually equated to two semesters or trimesters, three quarters, or the period covered by a four-one-four plan.

7. List the typical tuition and required fees for a full-time undergraduate student for the FULL 1996-97 ACADEMIC YEAR. — Do NOT include room and board charges. For reference, we are including the amount you reported last year.

a. No full-time undergraduate students — SKIP to question 8

| b. UNDERGRADUATE STUDENT | AMOUNT | AMOUNT REPORTED FOR 1995-96 |
|--------------------------|----------|-----------------------------|
| (1) In-district | \$ 1,410 | \$ 1,050 |
| (2) In-State | \$ 1,110 | \$ 1,050 |
| (3) Out-of-State | \$ 2,904 | \$ 3,453 |

c. What is the typical number of credit hours (or contact hours) taken by a full-time undergraduate student in a full academic year? Answer in credit hours OR contact hours, but not both. Provide a single figure, NOT a range of hours.

Credit

Contact

Number of hours

45

8. List the typical tuition and required fees for a full-time graduate student for the FULL 1996-97 ACADEMIC YEAR. — Do NOT include room and board charges. For reference, we are including the amount you reported last year.

a. No full-time graduate students — SKIP to question 9

| b. GRADUATE STUDENT | AMOUNT | AMOUNT REPORTED FOR 1995-96 |
|---------------------|--------|-----------------------------|
| (1) In-district | \$ | \$ |
| (2) In-State | \$ | \$ |
| (3) Out-of-State | \$ | \$ |

c. What is the typical number of credit hours taken by a full-time graduate student in a full academic year? Provide a single figure, NOT a range of hours.

Number of credit hours

9. List the typical tuition and required fees for a full-time first-professional student for the FULL 1996-97 ACADEMIC YEAR. — Do NOT include room and board charges. For reference, we are including the amount you reported last year.

a. No full-time first-professional students — SKIP to question 10

| b. FIRST-PROFESSIONAL STUDENT | AMOUNT | AMOUNT REPORTED FOR 1995-96 |
|-----------------------------------|--------|-----------------------------|
| (1) Chiropractic (D.C. or D.C.M.) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |
| (2) Dentistry (D.D.S. or D.M.D.) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |

PLEASE CONTINUE WITH QUESTION 9 ON NEXT PAGE.

Part D — STUDENT CHARGES FOR ACADEMIC YEAR 1996-97 — Continued

IC

9. Continued

| b. FIRST-PROFESSIONAL STUDENT — Continued | AMOUNT | AMOUNT REPORTED FOR 1995-96 |
|---|--------|--------------------------------|
| (3) Medicine (M.D.) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |
| (4) Optometry (O.D.) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |
| (5) Osteopathic Medicine (D.O.) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |
| (6) Pharmacy (Pharm. D.) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |
| (7) Podiatry (Pod.D., D.P., or D.P.M.) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |
| (8) Veterinary Medicine (D.V.M.) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |
| (9) Law (LL.B. or J.D.) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |
| (10) Theology (M.Div., M.H.L., B.D. or Ordination) | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |
| (11) Other — Specify \checkmark | | |
| _____ | | |
| (a) In-State | \$ | \$ |
| (b) Out-of-State | \$ | \$ |

c. What is the typical number of credit hours taken by a full-time first-professional student in a full academic year? Provide a single figure, NOT a range of hours. →

Number of credit hours

Part D — STUDENT CHARGES FOR ACADEMIC YEAR 1996-97 — Continued

IC

10. Dormitory facilities, board, and meal plans

a. Do you provide dormitory facilities for your students?

- 1 Yes — **What is the total dormitory capacity for your institution for the full 1996-97 academic year?**
- 2 No

Dormitory capacity

b. Do you provide board or meal plans to your students?

- 1 Yes — **How many meals per week are included in the board charge (or in the combined room and board charge, if you cannot separate these charges)?**
- Answer only one of the following.*

1 _____ Number of meals per week _____ Number of meals per week reported for 1995-96

- 2 Mark (X) this box if the number of meals per week can vary (for example, student receives a meal card and charges meals against the card).
- 2 No

11. What are the typical room and board charges for a student for the full 1996-97 academic year?

If your institution provides room or board free of charge — *Enter zero.*
If your institution does not provide room or board — *Leave the line(s) blank.*

| ROOM AND BOARD CHARGES | AMOUNT | AMOUNT REPORTED FOR 1995-96 |
|--|--------|-----------------------------|
| a. Room charge | \$ | \$ |
| b. Board charge | \$ | \$ |
| c. Combined room and board charge — (Answer only if you CANNOT SEPARATE room and board charges.) | \$ | \$ |

REMARKS SECTION — Explain any major differences in student charges from those that were reported last year. By entering any explanations here, you may eliminate the need for telephone contact at a later date.

**Part E — ENROLLMENT AND INSTRUCTIONAL ACTIVITY —
ACADEMIC YEAR 1995-96 — Continued**

IC

NOTE

Part E requests data for academic year 1995-96, unlike Parts A-D and Part F which request data for academic year 1996-97. Please read the definition of credit course in the Glossary before completing this section of the survey form.

NOTE — If this institution's normal reporting practices exclude students enrolled in summer session(s) or extension division/programs, do not include them in your response to questions 1a, b, and c of Part E.

Total activity

1a. How many students were enrolled (total headcount) at your institution on October 15, 1995 (or your institution's official fall reporting date)? This number should include students taking courses for credit as well as those enrolled in occupational and vocational programs. (NCES may have completed this question for you.)

Total headcount of students enrolled on October 15, 1995

3,167

1b. How many students were enrolled (UNDUPLICATED count) during the 12-month period of July 1, 1995 through June 30, 1996? This number should include all students enrolled for credit as well as those enrolled in occupational and vocational programs. Include all students reported in question 1a above plus all other students enrolled during the 12-month period. If another 12-month period is used, indicate the start date of the period.

| Month | Day | Year |
|-------|-----|------|
| — | — | — |

| LEVEL OF ENROLLMENT | | TOTAL UNDUPLICATED COUNT |
|---|-----------------|--------------------------|
| (1) Undergraduate level students enrolled in 12-month period | | 4,577 |
| (2) Of the students reported on line 1 — How many enrolled as full-time, first-time, degree-seeking undergraduates at some time during the regular academic year? See instructions for examples. | Number enrolled | |
| | 880 | |
| (3) Graduate level students enrolled in 12-month period | | — |
| (4) First-Professional level students enrolled in 12-month period | | — |

REMARKS SECTION — Explain any major differences in student counts from those that were reported last year. By entering any explanations here, you may eliminate the need for telephone contact at a later date.

**Part E — ENROLLMENT AND INSTRUCTIONAL ACTIVITY —
 ACADEMIC YEAR 1995-96**

IC

COMBINED DATA FOR MORE THAN ONE INSTITUTION OR BRANCH

Note that the preprinted information (if provided) indicates which data were reported as combined last year.
 Verify that the information is correct for the current year. Please make any corrections in RED.

The institution named on this report is including data for other institutions/branches.

- No
 Yes — Please indicate below, the UNITID (if known), name and address of the institutions for which data are included.

| UNITID | Institution name | Address | City | State | ZIP Code |
|--------|------------------|---------|------|-------|----------|
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The data for this institution are reported by another institution.

- No
 Yes — Please indicate if data are being reported by another institution. Also list the UNITID, name, and address of the reporting institution.

| UNITID | Institution name | Address | City | State | ZIP Code |
|--------|------------------|---------|------|-------|----------|
| | | | | | |

**Part E — ENROLLMENT AND INSTRUCTIONAL ACTIVITY —
ACADEMIC YEAR 1995-96 — Continued**

IC

2. Summer session activity

a. Does this institution offer a summer session(s)?

- 1 No — SKIP to question 3 on page 21
2 Yes — Complete the following:

(a) Does the summer session(s) operate independently of the main academic portion of the institution? (For example, its academic mission may be significantly different, it may have its own admissions requirements, course offerings, completions requirements, and/or record keeping system.)

- 1 Yes
2 No

(b) Are summer session students included in the response to total unduplicated count (Part E, question 1b)?

- 1 Yes
2 No

(c) Is instructional activity in the summer session(s) included in the response to total activity (Part E, question 1c)?

- 1 Yes
2 No

b. How many students were enrolled (unduplicated count) for the 1995 summer session(s)? This number should include students taking courses for credit as well as those enrolled in occupational and vocational programs. Report these students here whether or not they are included in the responses to questions 1b and 1c of Part E.

| Total unduplicated count of students enrolled for the 1995 summer session(s) | |
|--|-----|
| (1) Undergraduates | 360 |
| (2) Graduates | — |
| (3) First-Professionals | — |

c. Report instructional activity for the 1995 summer session(s) for courses taken for credit as well as for courses that are part of an occupational or vocational program. Report these students here whether or not they are included in the responses to questions 1b and 1c of Part E.

| LEVEL OF COURSE | TOTAL ACTIVITY FOR 1995 SUMMER SESSION(S) |
|---|---|
| (1) Undergraduate credit hour activity (Do not include in (2) below.) | 34,854 |
| (2) Undergraduate contact hour activity (Do not include in (1) above.) | — |
| (3) Graduate credit hour activity | — |
| (4) First-Professional credit hour activity | — |

**Part E — ENROLLMENT AND INSTRUCTIONAL ACTIVITY —
ACADEMIC YEAR 1995-96 — Continued**

IC

1c. Instructional activity is requested below ONLY for courses taken for credit as well as courses that are part of an occupational or vocational program. *Instructional activity is the enrollment in a course multiplied by the credit hour (or contact hour) value of the course.* Please read the survey instructions for Part E, question 1c, before activity, or vice versa.

Courses measured in terms of credit hours should be included on lines 1, 3, and 4, as appropriate. Undergraduate courses measured in terms of contact or clock hours should be included on line 2. If your institution does not offer credit hour (or contact hour) courses at any of these course levels, leave the line(s) blank.

In the first column below, report instructional activity for the 12-month period described in question 1b on page 18. In the second column, report instructional activity for the fall term of 1995. If your institution has no fall term — **Mark (X) the box in that column and leave the column blank.**

| LEVEL OF COURSE | TOTAL ACTIVITY FOR 12-MONTH PERIOD | ACTIVITY IN FALL TERM |
|---|------------------------------------|---|
| | | <input type="checkbox"/> Mark (X) this box if no fall term. |
| (1) Undergraduate credit hour activity (Do not include in (2) below.) | 643,366 | 237,981 |
| (2) Undergraduate contact hour activity (Do not include in (1) above.) | — | — |
| (3) Graduate* credit hour activity | — | — |
| (4) First-Professional* credit hour activity | — | — |

WORKSHEET FOR GRADUATE AND FIRST-PROFESSIONAL ACTIVITY

**If credit hours cannot be assigned to first-professional and graduate courses, use the worksheet provided below.*

| 12-MONTH GRADUATE | FALL TERM GRADUATE |
|---|--|
| Full-time enrollment 1st term: _____ X 12 = _____ 2nd term: _____ X 12 = _____ 3rd term: _____ X 12 = _____ 4th term: _____ X 12 = _____ Part-time enrollment 1st term: _____ X 5 = _____ 2nd term: _____ X 5 = _____ 3rd term: _____ X 5 = _____ 4th term: _____ X 5 = _____ Total (Sum down) = _____ | Full-time enrollment in the fall _____ X 12 = _____ Part-time enrollment in the fall _____ X 5 = _____ Total (Sum down) = _____ |
| 12-MONTH FIRST-PROFESSIONAL | FALL TERM FIRST-PROFESSIONAL |
| Full-time enrollment 1st term: _____ X 16 = _____ 2nd term: _____ X 16 = _____ 3rd term: _____ X 16 = _____ 4th term: _____ X 16 = _____ Part-time enrollment 1st term: _____ X 8 = _____ 2nd term: _____ X 8 = _____ 3rd term: _____ X 8 = _____ 4th term: _____ X 8 = _____ Total (Sum down) = _____ | Full-time enrollment in the fall _____ X 16 = _____ Part-time enrollment in the fall _____ X 8 = _____ Total (Sum down) = _____ |

**Part E — ENROLLMENT AND INSTRUCTIONAL ACTIVITY —
ACADEMIC YEAR 1995-96 — Continued**

IC

3. Extension division/program activity

a. Does this institution have an extension division/program?

- 1 No — *SKIP to Part F on page 22.*
2 Yes — *Complete the following:*

(a) Does the extension division/program operate independently of the main academic portion of the institution? (For example, its academic mission may be significantly different, it may have its own admissions requirements, course offerings, completions requirements, and/or record keeping system.)

- 1 Yes
2 No

(b) Are extension division/program students included in the response to total fall enrollment (Part E, question 1a)?

- 1 Yes
2 No

(c) Are extension division/program students included in the response to total unduplicated count (Part E, question 1b)?

- 1 Yes
2 No

(d) Is instructional activity in the extension division/program included in the response to total activity (Part E, question 1c)?

- 1 Yes
2 No

b. How many students were enrolled (unduplicated count) in the extension division/program during the 12-month period specified in question 1b on page 18? This number should include students taking courses for credit as well as those enrolled in occupational and vocational programs. *Report these students here whether or not they are included in the responses to questions 1a, b, and c in Part E.*

| Total unduplicated count of students enrolled in the extension division/program during the 12-month period | |
|--|--|
| (1) Undergraduates | |
| (2) Graduates | |
| (3) First-Professionals | |

c. Report instructional activity for the extension division/program for the 12-month courses taken for credit as well as for courses that are part of an occupational or vocational program. Report these students here whether or not they are included in the responses to questions 1a, b, and c in Part E.

| LEVEL OF COURSE | TOTAL ACTIVITY FOR 12-MONTH PERIOD IN EXTENSION DIVISION/PROGRAM |
|--|--|
| (1) Undergraduate credit hour activity <i>(Do not include in (2) below.)</i> | |
| (2) Undergraduate contact hour activity <i>(Do not include in (1) above.)</i> | |
| (3) Graduate credit hour activity | |
| (4) First-Professional credit hour activity | |

Part F — ADDITIONAL INFORMATION

IC

1. In which of the following Federal student financial aid programs is this institution eligible to participate? Mark (X) all that apply for the current academic year.

- 1 Veterans Administration Educational Benefits (VA)
- 2 Pell Grants
- 3 Supplementary Education Opportunity Grants (SEOG)
- 4 Stafford Loans (formerly GSL)
- 5 College Work Study Program (CWS)
- 6 Perkins Loan (formerly National Direct Student Loan (NDSL))
- 7 Health Education Assistance Loan (HEAL)
- 8 Other Federal student financial aid programs
- 9 Not eligible for any of the above

2. Does this institution offer instruction through the Job Training Partnership Act (JTPA)? Mark (X) only one.

- 1 Yes
- 2 No
- 3 Do not know

3. Does this institution offer training through the Reserve Officers Training Corps (ROTC)?

- 1 Yes — **Which branch of the service?**
Mark (X) all that apply. →
 - a Army
 - b Navy
 - c Air Force
- 2 No

4. Does this institution give athletic aid to students?

- 1 Yes — **Mark (X) appropriate box**
 - a Football
 - b Basketball
 - c Baseball
 - d Cross country and/or track
 - e Other
- 2 No

Remarks