

**BUREAU FOR PRIVATE POSTSECONDARY EDUCATION ANNUAL REPORT 2016
PROGRAM DATA-20171130110512**

Section #1 - BPPE Annual Report for 2016 - Institution

1. Report for Year: 2016

2. Institution Name: International School of Nursing

3. Institution Code: 4800831

4. Street Address: 1330 Springs Road

5. City: Vallejo

6. State: California

7. Zip Code: 94591

8. Check all that apply to this institution:

- For profit institution
- Sole Proprietor
- Corporation
- Non-profit institution
- Limited Liability Corporation (LLC)
- Publicly traded institution
- Partnership

9. Number of Branch Locations:

10. Number of Satellite Locations:

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

Yes No

b. Is this institution current on Annual Fees?

Yes No

12. Is your institution accredited by an accrediting agency/agencies recognized by the United States Department of Education? Select from the drop down box, and refer to the online instructions for selecting more than one accrediting agency. Include only full institutional approval, not programmatic approval.

Yes No

**If you answered yes to the question above, please identify the accrediting agency. Please note that you can select more than one agency -in order to accomplish this make sure that you do the following:*

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

14. Has any accreditation agency taken any formal disciplinary action against this institution? If Yes, please submit a paper copy of the action, refer to the Annual Report Completion Check Sheet.

Yes No

15. Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act?

Yes No

• What is the total amount of Title IV funds received by your institution in 2016?

16. Does your institution participate in veteran's financial aid education programs?

Yes No

• What is the total amount of veteran's financial aid funds received by your institution in 2016?

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

Yes No

• What is the total amount of Cal Grant Funds received by your institution in 2016?

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

Yes No

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

Yes No

• What is the total amount of WIOA funds received by your institution in 2016?

20. Does your Institution participate in, or offer any other government or non-governmental financial aid programs? (i.e., WIC, vocational rehab, private grants/loans, institutional grants/loans)

Yes No

If yes, please provide the name of the financial aid program: Department of Rehabilitation

21. The percentage of institutional income in 2016 that was derived from public funding: 31%

22. Enter the most recent three-year Cohort Default Rate reported by the U.S. Department of Education, for this institution: %, if applicable.

23. The percentage of the students who attended this institution in 2016 who received federal student loans to help pay their cost of education at the school was: %

24. Total number of students enrolled at this institution:

25. Number of Doctorate Degrees programs Offered:

26. Number of Students enrolled in Doctorate level programs at this Institution:

27. Number of Master Degrees programs Offered:
28. Number of Students enrolled in Master level programs at this institution:
29. Number of Bachelor Degrees programs Offered:
30. Number of Students enrolled in Bachelor level programs at this institution:
31. Number of Associate Degrees programs Offered:
32. Number of Students enrolled in Associate level programs at this institution:
33. Number of Diploma or Certificate Programs Offered:
34. Number of Students enrolled in Diploma or Certificate programs at this institution:

35. Institutions maintaining an internet web page are required to post on the homepage of their website clear and conspicuous links to the most recent Annual Report submitted to the Bureau, Catalog, and School Performance Fact Sheet (CEC §94913).** Please post the documents to your website prior to submitting the certification and provide the links to the institution's Annual Report, Catalog, School Performance Fact Sheet below. If the institution does not maintain an internet website, leave this space blank.

**The Bureau recommends a portion of the school's website dedicated to providing students with the required information below. This section should include the Annual Report, Catalog, and Student Performance Fact Sheet.

Links

Institution's Website: www.intlsch-nursing.org
Performance Fact Sheet: www.intlsch-nursing.org
Catalog: www.intlsch-nursing.org
Annual Report: www.intlsch-nursing.org

**BUREAU FOR PRIVATE POSTSECONDARY EDUCATION ANNUAL REPORT 2016
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Section #2

1. **Report for Year 2016**
2. **Institution Code?** Enter institutional code (main location). **4800831**
3. **Degree/Program Level?** Indicate the level of degree for the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, diploma) if the program is not a degree Indicate "diploma".) **Certioficat/Diploma**
4. **Degree/Program Title?** Indicate the title of the degree for the program you are entering e.g., Ph.D., Master of Science, Bachelor of Arts, Occupational Associate. If the program is not a degree, indicate the name of the certificate/diploma program. **Certificate/Diploma**
5. **Name of Program?** Indicate the name of the program e.g., Business Administration, Cosmetology, Medical Assisting. **Home Health Aide**
6. **Number of Degrees or Diplomas Awarded?** Indicate the number of students receiving a degree or diploma for this program during the reporting year. **28**
7. **Total Charges for this program?** Indicate the total charges for a 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. It includes books, uniforms or other charges if those charges are for costs that are required for participation in the educational program. **\$630.00**
8. **The percentage of enrolled students in 2016 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. **NA**
9. **The percentage of graduates in 2016 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 2016 graduates from this program, who took out federal student loans to pay for this program, by the total number of 2016 graduates from this program. **NA**
10. **Number of Students Who Began the Program?** Indicate the number of students who began the program who are scheduled to complete the program in the year being reported, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). If the institution has a main campus with branches and/or satellites provide the total number enrolled at all locations. **30**
11. **Students Available for Graduation?** Indicate the number of students available for graduation for the program being reported. This number should be the number of students who began the program (#10 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)). **30**

12. **On-time Graduates?** Of the students available for graduation (#11 above), indicate the number of students who completed the program within 100% of the published program period within the calendar year being reported (5 CCR §74112(d)(2)). **26**
13. **Completion Rate?** Indicate the number of graduates (from #12 above) divided by the number of students available for graduation (#11 above). **A “rate” is a percentage and should never be more than 100%** (CEC §94929(a), 94928(f) & (g), and 5 CCR §74112(h)). **86.6%**
14. **150% Completion Rate?** If the institution tracks 150% completion rate, indicate the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates, divided by the number of students available for graduation (#11 above). **A “rate” is a mathematical calculation and should never be more than 100%** (5 CCR §74112(h)(l)). **93.3%**
15. **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. **No**

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.

16. **Graduates Available for Employment?** Indicate the number of individuals awarded a degree, diploma or certificate in the 2016 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)). **30**
17. **Graduates Employed in the Field?** Number of graduates, (#16 above) 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)). **25**
18. **Placement Rate?** Indicate the number of graduates employed in the field (#17 above) divided by the number of graduates available for employment (#16 above.) **A “rate” is a mathematical calculation and should never be more than 100%** (5 CCR §74112(i)(4)). **83.3%**
19. **Graduates employed in the field 20 to 29 hours per week?** Indicate the number of graduates employed 20 to 29 hours per week. **4**
20. **Graduates employed in the field at least 30 hours per week? 21**

Indicate the number of graduates employed at least 30 or more hours per week.

21. Indicate the number of graduates employed :

- a. Single position in field 25
- b. Concurrent aggregated positions in field 0 (2 or more positions at the same time)
- c. Freelance/ self-employed 0
- d. By the Institution or an employer owned by the institution, or an employer who shares ownership with the institution 0

Exam Passage Rate

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.

22. 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” below

First Data Year 2016

Two years data is required.

23. **Name of the State licensing entity that licenses the field.** Enter the name of the State licensing entity *California Department of Public Health*

24. **Name of Exam?** Provide the name of the State exam being reported. **NA**

25. **Number of Graduates Taking State Exam?** Enter the number of graduates who took the State exam in the reported year (CEC §94929.5(a)(2) and 5 CCR §74112(j)). **NA**

26. **Number Who Passed the State Exam?** Enter the number of graduates who took the State exam and passed it on the first attempt (CEC §94929.5(a)(2) and 5 CCR §74112(j)). **NA**

27. **Number Who Failed the State Exam?** Enter the number of graduates who took the State exam and failed it on the first attempt (CEC §94929.5(a)(2) and 5 CCR §74112(j)). **NA**

28. **Passage Rate?** Enter the passage rate for graduates who took the State exam and passed it on the first attempt. **NA**

29. **Is This Data from the State Licensing Agency that Administered the Exam?** (5 CCR § 74112(j)). If yes, enter the name of the Agency **NA**

30. **If the response to #29 was “no” provide a description of the process used for Attempting to Contact Students.** If the information for the State exam passage data was collected directly from the students by the institution provide a description of the process used for attempting to contact students (5 CCR §74112(j)). If more space is needed please attach an explanation and clearly mark it “Process for attempting to contact students.” **NA**

Second Data Year 2015

Two years data is required.

31. **Name of the State licensing entity that licenses the field.** Enter the name of the State licensing entity *California Department of Public Health*
32. **Name of State Exam?** Provide the name of the exam being reported. *NA*
33. **Number of Graduates Taking State Exam?** Enter the number of graduates who took the exam in the reported year (CEC §94929.5(a)(2) and 5 CCR §74112(j)). *NA*
34. **Number Who Passed the State Exam?** Enter the number of graduates who took the exam and passed it on the first attempt (CEC §94929.5(a)(2) and 5 CCR §74112(j)). *NA*
35. **Number Who Failed the State Exam?** Enter the number of graduates who took the exam for the first time and failed it (CEC §94929.5(a)(2) and 5 CCR §74112(j)). *NA*
36. **Passage Rate?** Enter the passage rate for graduates who took the State exam and passed it on the first attempt. *NA*
37. **Is This Data from the Licensing Agency that Administered the State Exam?** (5 CCR §74112(j)) If yes, enter the name of the agency. *NA*
38. **If the response to #37 was “no” provide a description of the process used for Attempting to Contact Students:** If the information for the State exam passage data was collected directly from the students by the institution provide a description of the process used for attempting to contact students (5 CCR §74112(j)). If more space is needed please attach an explanation and clearly mark it “Process for attempting to contact students.” *NA*
39. **Do graduates have the option or requirement for more than one type of State licensing exam?** If “Yes” provide the names of other licensing exam options or requirements: *NA*
- Salary Data - 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.**
40. **Graduates Available for Employment?** Indicate number of graduates (#16 above) (CEC §94928(d), (f), and 5 CCR §74112(l)). *57*
41. **Graduates Employed in the Field?** Indicate the number of graduates who are gainfully employed (#17 above) (CEC §94928(e), and 5 CCR §74112(l)). *40*
42. **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 a 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.

A number must be entered in all spaces. If the institution has zero students reporting a certain wage enter the number "0."

2015 Graduates employed in the Field reported to be receiving the following Salary or Wage:

\$0 - \$5000	<u> </u>	\$5,001 - \$10,000	<u> </u>
\$10,001 - \$15,000	<u> 10 </u>	\$15,001 - \$20,000	<u> 5 </u>
\$20,001 - \$25,000	<u> 17 </u>	\$25,001 - \$30,000	<u> 9 </u>
\$30,001 - \$35,000	<u> 9 </u>	\$35,001 - \$40,000	<u> </u>
\$40,001 - \$45,000	<u> </u>	\$45,001 - \$50,000	<u> </u>
\$50,001 - \$55,000	<u> </u>	\$55,001 - \$60,000	<u> </u>
\$60,001 - \$65,000	<u> </u>	\$65,001 - \$75,000	<u> </u>
\$70,001 - \$75,000	<u> </u>	\$75,001 - \$80,000	<u> </u>
\$80,001 - \$85,000	<u> </u>	\$85,001 - \$90,000	<u> </u>
\$90,001 - \$95,000	<u> </u>	\$95,001 - \$100,000	<u> </u>
Over \$100,000	<u> </u>		