

[Exit this survey](#)

NWCCU Annual Report 2010

Section 1: Basic Institutional Data

Use fall 2009 data in completing the 2010 Annual Report questions.

Definitions generally align with USDOE and IPEDS definitions, and NWCCU policies.

Complete survey by June 1, 2010.

If at any time you must exit the survey before you are finished, save your responses using the "Next/Save" button at the bottom of the page. If you do not press that button before exiting, any answers on the page you are currently on will NOT be saved. You will be only be able to complete the survey using the computer you started with. (NOTE: if you have cookies disabled on your computer, your responses will NOT be saved.

For a printable version of the 2010 Annual Report questions for data collection purposes, visit our website at www.nwccu.org and follow the link on the front page to the Annual Report information page, which has both a PDF and Word version of the report questions.

[Click here](#) to access question FAQs and definitions in a new page.

* Please list the main campus address of the institution:

Institution Name:

Physical Address:

P.O. Box/Address

2:

City/Town:

State/Province:

ZIP/Postal Code:

Country:

* Please update contact information for the President/CEO/Chancellor:

Name:

Title:

Address 1:

Address 2:

City/Town:

State/Province:

ZIP/Postal Code:

Country:

Email Address:

Phone Number:

*** Please update contact information for the Accreditation Liaison Officer (ALO):**

Name:

Title:

Address 1:

Address 2:

City/Town:

State/Province:

ZIP/Postal Code:

Country:

Email Address:

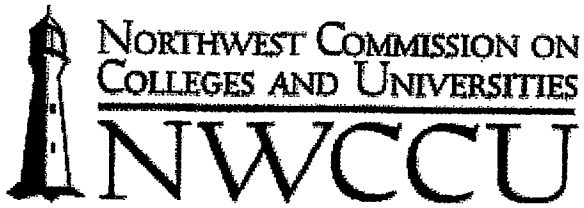
Phone Number:

*** Institution type (check one):**

Help?

<input checked="" type="radio"/> Public	<input type="radio"/> Private Non-Profit
<input type="radio"/> Tribal/Native	<input type="radio"/> Private For-Profit

	4%
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[Exit this survey](#)

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Section 2: Institutional Information and Demographics

* Degree levels offered (check all that apply):

[Help?](#)

<input checked="" type="checkbox"/> Associate	<input type="checkbox"/> Master's Degree
<input type="checkbox"/> Baccalaureate	<input type="checkbox"/> Doctorate

* Have changes been made in the Articles of Incorporation and/or By-Laws since the 2008 Annual Report was filed? If yes, please send an electronic copy of the revised document(s) to Reports@Nwccu.org.

<input type="radio"/> Yes
<input checked="" type="radio"/> No

* Calendar Plan:

[Help?](#)

<input type="checkbox"/> Semester	<input checked="" type="checkbox"/> Quarter
<input type="checkbox"/> Trimester	<input type="checkbox"/> 4-1-4
<input type="checkbox"/> Other (please specify)	

* Students at all locations - Unduplicated headcount:

[Help?](#)

Undergraduate	<input type="text" value="3611"/>
Graduate	<input type="text"/>
Unclassified	<input type="text"/>
Total	<input type="text" value="3611"/>

* Students at all locations - Fulltime Equivalent (FTE):

Help?

Undergraduate	2304
Graduate	
Unclassified	
Total	2304

*** Faculty (all locations) - Unduplicated Headcount:**

Help?

Full-time	63
Part-time	126
Total	189

*** Faculty (all locations) - Full-Time Equivalent (FTE):**

Help?

Full-time	63
Part-time	30.90
Total	93.90

*** Institutional Finances:**

Please enter a number without symbols, spaces or commas. If the institution has no deficits, please enter the number "0".

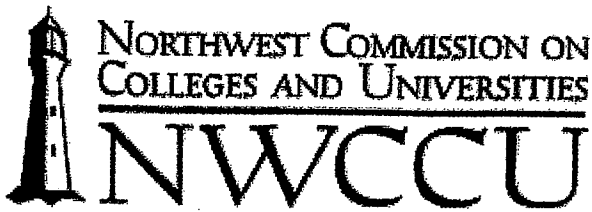
Help?

Expenses (see <u>Definition</u>)	24,553,288
Operating <u>Deficit</u> (if none, enter "0")	0
Accumulated <u>Deficit</u> (if none, enter "0")	0

	8%
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Prev

Next/Save



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Section 2 (cont): Institutional Demographics

* Cohort default rate on Title IV, HEA subsidized and unsubsidized loans in which the student is the designated borrower for the cohort fiscal year of 2007 ending September 30, 2008. Do not include loans made directly to parents, such as PLUS loans.

[Help?](#)

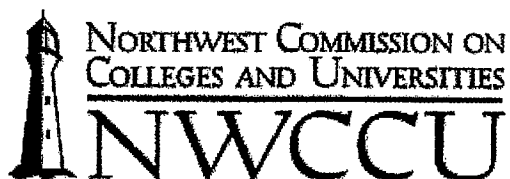
Cohort Fiscal Year 2007 Default Rate:

	9.3
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* Does your institution use its accreditation or pre-accreditation with the Northwest Commission on Colleges and Universities to establish eligibility to participate in Higher Education Act (HEA) programs, including Title IV funding?

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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	12%
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[Exit this survey](#)

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Section 4: Terminated Programs/Certificates

Degree or Certificate Programs of 30 semester/45 quarter credits or more in length terminated in 2009-2010:

If NONE, indicate N/A in first blank line only.

Certificate/Degree

Level

Program Name

Discipline or Program Area

Next (if needed)

Certificate/Degree

Level

Program Name

Discipline or Program Area

Next (if needed)

Certificate/Degree

Level

Program Name

Discipline or Program Area

Next (if needed)

Certificate/Degree

Level

Program Name

Discipline or Program Area

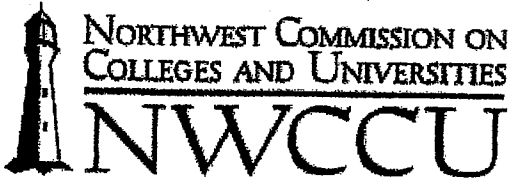
Next (if needed)

Certificate/Degree

Level

Program Name

Discipline or Program Area



[Exit this survey](#)

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Section 7: Off-Campus Programs

Domestic Certificates/Degree Programs where 50% or more of the credits are offered at any Off-Campus Locations including branch, satellite, or secondary sites in or out of the institution's service area. If NONE, indicate N/A in first blank line only.

Accurate information about off-campus programs is critical to the Commission in responding to inquiries and verifying program locations to the U.S. Department of Education relative to Title IV eligibility.

If the Location and Physical Address remain the same and only the Program Name or Discipline changes, it is not necessary to re-enter duplicate information. Please enter only the Degree/Certificate level, Program/Discipline name and Student Enrollment.

If None, enter N/A in first blank line only.

Location Name

Physical Street Address

Degree/Certificate Name/Level

Program Name

Student Enrollment

(Unduplicated)

On-Site

Staff/Administrator (Yes or No)

Co-Sponsoring

Organization (if applicable)

Location Name

Physical Street Address

Degree/Certificate Name/Level

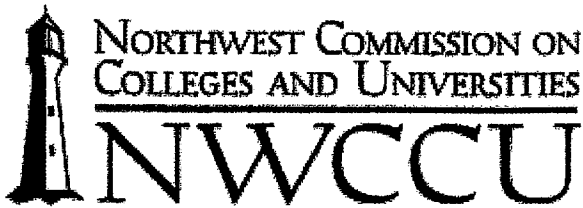
Program Name

Student Enrollment

(Unduplicated)

On-Site

Staff/Administrator (Yes or No)



[Exit this survey](#)

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Section 10: Conclusion

Please add any comments here for the Commission office on the format or questions of the 2010 Annual Report.

* Please enter the specific institutional code provided to the President of your institution. Use of this code constitutes an electronic signature by the President and will be accepted by NWCCU as formal acceptance and responsibility for the data contained in this survey.

57.332

The 2010 NWCCU Annual Report is now completed. Thank you very much!

	100%
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Prev Done