



# CAMPUS ACCOUNTABILITY REPORT FOR INITIAL APPLICANTS

FOR THE YEAR July 1, 2015- June 30, 2016  
List specific dates (must be the most recent July 1 – June 30 period)

*Keep a copy of this report and all back-up documentation (specific information used to prepare this report) for review by future ACICS evaluation teams.*

Name of Institution: Agape College of Business and Science ACICS ID Code: \_\_\_\_\_

Report prepared by:

Name: Linda Washington, CEO

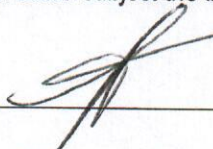
Date: \_\_\_\_\_

Prepared: 10-7-2016

Report checked for accuracy and completeness by:

Name: Diana Padilla, Dean of Schools

*"I am an officer, stockholder or authorized employee of the above-named institution and this Annual Institutional Report has been prepared from the actual records of the institution. I am acting in an official capacity for the institution in signing this Annual Institutional Report and understand that failure to submit accurate and complete information in the report could subject the institution to show cause why its accreditation should not be suspended or revoked."*

Signature (required): 

Name: Linda Washington

## ENROLLMENT DATA (Include all students for 12-month period)

- |   |           |
|---|-----------|
| 1. Enrollment as of the beginning of this reporting period                  | <u>14</u> |
| 2. Additions during the year:   |           |
| a. new starts   | <u>9</u>  |
| b. re-entries   | <u>1</u>  |
| 3. Total enrollment during the reporting period (add #1, #2a, and #2b)      | <u>24</u> |
| 4. Of the total enrollment (#3 above), how many:                            |           |
| a. enrolled without a high school diploma or equivalent?                    | <u>2</u>  |
| b. obtained a high school diploma or its equivalent while enrolled?         | <u>0</u>  |
| c. enrolled in one or more courses through distance learning delivery mode? | <u>14</u> |
| 5. Of the total enrollment (#3 above), how many:                            |           |
| a. were enrolled in less than a full program?                               | _____     |

- |     |  |           |
|-----|--|-----------|
| b.  | completed a program (see definition in instructions)?  | _____     |
| c.  | graduated from a program (see definition in instructions)?   | <u>7</u>  |
| d.  | withdrew due to active military service?   | _____     |
| e.  | withdrew due to incarceration or death?  | _____     |
| f.  | withdrew from the institution?   | <u>4</u>  |
| g.  | are still enrolled?  | <u>13</u> |
| 6.  | What is the <b>total</b> of #5a through #5g? (must equal #3)                                       | <u>24</u> |
| 7.  | Add #5b + #5c (graduates and completers total):  | <u>7</u>  |
| 8.  | Of the students listed in #7 above, how many enrolled without a high school diploma or equivalent? | <u>1</u>  |
| 9.  | Of the number in #5f above, how many withdrew for related employment?                              | _____     |
| 10. | As of the date this report was completed, how many students listed in #7 above were:               |           |
| a.  | placed (see definition)  | <u>5</u>  |
| b.  | placed out of field?   | _____     |
| c.  | not available for placement due to pregnancy, death or other health-related situations?            | _____     |
| d.  | not available for placement due to continuing education?   | <u>1</u>  |
| e.  | not available due to active military service?  | _____     |
| f.  | not available due to incarceration?  | _____     |
| g.  | international students not available due to visa restrictions?                                     | _____     |
| h.  | enrolled in stand-alone English as a Second Language Program?                                      | _____     |
| i.  | not working?   | <u>1</u>  |
| 11. | What is the <b>total</b> of #10a through #10i (Must equal #7)                                      | <u>7</u>  |

**CALCULATE YOUR INSTITUTION'S RETENTION AND PLACEMENT RATES**

See the formulas on page 4 of instructions.

<b>Retention</b>	<u>83%</u>
<b>Placement</b>	<u>83%</u>

**CONTRACT TRAINING**

12. Indicate if your institution participated with a federal, state or local government entity (including GI Bill, JTPA, VOCREHAB, VEA – Vocational Education Act, and AEA – Adult Education Act), other company or organization whereby your institution was responsible for providing training to contracted students including students who were incarcerated at the time of training. \_\_\_ Y x N
13. Did your institution participate in any third party contractual with another organization or educational institution whereby the other organization had the obligation to provide a portion of your students' training? \_\_\_ Y x N

**FACULTY DATA** (do not include those involved in full-time administrative work)

	Full-Time	Part-Time
14. Faculty as of the beginning of this reporting period.	<u>1</u>	<u>9</u>
a. additions during the reporting period.	<u>1</u>	<u>3</u>
b. permanent terminations and resignations during this reporting period.	_____	<u>2</u>



15. Faculty at the end of this period.

2      8

16. What is the average student – faculty ratio?

10 to 1

## LEGAL/REGULATORY DATA

17. Have there been any:

a. suits/legal actions, judgments, or settlements concerning the institution?

    Y x N

b. program reviews or I.G. audits during this period?

if yes to either # 17a or #17b, please attach explanation and a summary of any findings.

    Y x N

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## INSTITUTIONAL DEFAULT DATA

18. What was your institution's annual cohort default rate for:

2011 N/A      2010 N/A      2009 N/A

a. Do you believe that these rates are accurate?

    Y x N

b. Have you filed an appeal with the Department of Education concerning your institution's default rate or loss of eligibility?

    Y x N

c. What percentage of the students enrolled at the end of the reporting period are participating in of the any Federal Student Loan programs?

N/A %

## DEMOGRAPHIC INFORMATION

19. Choose the one category below which best describes where your institution is located:

an urban area of greater than 500,000 people

x

an urban area with a population of 150,000-500,000

an urban area with less than 150,000 people

a suburban location

a rural location

20. Breakdown of Enrollment from Question #3

Number of female students

23

Number of male students

1

## ACADEMIC PROGRAM INFORMATION

Copy this form and complete for each program included in the initial accreditation application, as offered at your institution.

Name of Institution: Agape College of Business & Science ACICS ID Code: \_\_\_\_\_

Name of Program: Business Administration

Program Code Number (from the list provided in the instructions): \_\_\_\_\_

Credential Awarded: (Check one only)

Certificate/Diploma  Academic Associate's Degree  
 Occupational Associate's Degree  Bachelor's Degree  
 Master's Degree

Length in Weeks: 72 \_\_\_\_\_  
Day Night

Credits or Hours Awarded: 90 Unit of Credit: Semester \_\_\_\_\_ Quarter 6 Clock Hour \_\_\_\_\_

Minimum Number of Credits or Hours of General Education Required for Program Completion: 24

Program measurement (all must be provided):

(A) Number of contact hours	_____	_____
	Day	Night
(B) Total program tuition	<u>4065</u>	_____
	Day	Night
(C) Total program fee charged	<u>5890</u>	_____
	Day	Night

Does this program have separate programmatic accreditation? \_\_\_\_\_ Yes  No

If yes, please list the accrediting agency. \_\_\_\_\_

Is certification, licensure, or registration required to become employed in the curriculum area? \_\_\_\_\_ Yes  No

**If yes, please complete the CAR Addendum for Licensure Reporting**



## ENROLLMENT DATA

Include only students enrolled in this program for the 12-month period being reported

1.	Enrollment in the program as of the beginning of this reporting period, _____	9
2.	Additions during the year:	
	a. new program starts	4
	b. program re-entries	1
	c. transfers into the program from other programs at your institution	0
3.	<b>Total</b> program enrollment during the reporting period (add #1, #2a, #2b, and #2c)	14
4.	Of the total program enrollment (#3 above), how many:	
	a. enrolled without a high school diploma or equivalent?	0
	b. obtained a high school diploma or its equivalent while enrolled?	0
5.	Of the total program enrollment (#3 above), how many:	
	a. transferred out of the program to other programs at your institution?	0
	b. completed a program (see definition in instructions)?	0
	c. graduated from a program (see definition in instructions)?	3
	d. withdrew due to active military service?	0
	e. withdrew due to incarceration or death?	0
	f. withdrew from the institution?	3
	g. are still enrolled?	8
6.	What is the <b>total</b> of #5a through #5g? (must equal #3)	14
7.	Add #5b + #5c.	3
8.	Of the students listed in #7 above, how many enrolled without a high school diploma or equivalent?	0
9.	Of the number in #5d above, how many withdrew for related employment?	0
10.	As of the date this report was completed, how many students listed in #7 above were:	
	a. placed?	3
	b. placed out of field?	0
	c. not available for placement due to pregnancy, death or other health-related situations?	0
	d. not available for placement due to continuing education?	0
	e. not available due to active military service?	0
	f. not available due to incarceration?	0
	g. international students not available due to visa restrictions?	0
	h. enrolled in stand-alone English as a Second Language Program?	0
	i. not working?	0
11.	What is the <b>total</b> of #10a through #10i? (Must equal #7)	3

### **CALCULATE YOUR INSTITUTION'S RETENTION AND PLACEMENT RATES FOR THIS PROGRAM**

See formulas on page 4 of the instructions

<b>Program Retention</b>	78
<b>Program Placement</b>	100

# CAR Addendum for Licensure Reporting

Institution ID:  
Institution Name:  
ACICS Program Name (Code):  
Institutional Program Name:  
Credential Awarded:

## Licensure Information

1. Is certification, licensure, or registration based upon an industry-recognized examination required to become employed in your state in this curriculum area?

- Yes  
 No

2. Agency administering the exam:

3. What is the first-time pass rate for this program (i.e., the percent of program graduates who sat for the examination and received a passing score when they first took the exam) for the last three calendar years? If there is no pass rate available for one or more year(s) select "No Data" for the year(s). This will populate the field with N/A for all blank fields.

No Data for all fields    No Data for all blank fields

2012:	N/A
	No Data
2011:	N/A
	No Data
2010:	N/A
	No Data

If the pass rate for 2012 is "N/A," please explain (required).

Data not available.

4. Enter the cumulative pass rate for this program for 2012 (i.e., the percent of program graduates who sat for the examination and received a passing score in the first or a subsequent taking of the exam during the calendar year), if it is provided or can be calculated.

Data not available.



5. If the agency providing the certificate, license, or registration based upon an examination has a pass rate standard (i.e. the pass rate that a program must meet or exceed in order to be in good standing), please describe the following:

a. the standard (%) \_\_\_\_\_

6. Does the program prepare graduates to take a certification, licensure, or registration examination required to become employed in any other states (e.g., including, but not limited to, contiguous states or states served through distance education)? Do not include national exams like the NCLEX or reciprocity agreements.

Yes

No

7. Does the agency in any of these other states which provides the certificate, license, or registration examination have a pass rate standard?

Yes

No

8. Describe

the state or states

the standard (%)

Your pass rate in this state

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## ACADEMIC PROGRAM INFORMATION

Copy this form and complete for each program included in the initial accreditation application, as offered at your institution.

Name of Institution: Agape College of Business & Science

ACICS ID Code: \_\_\_\_\_

Name of Program: Medical Assisting

Program Code Number (from the list provided in the instructions): \_\_\_\_\_

Credential Awarded: (Check one only)

Certificate/Diploma

\_\_\_\_\_ Academic Associate's Degree

\_\_\_\_\_ Occupational Associate's Degree

\_\_\_\_\_ Bachelor's Degree

\_\_\_\_\_ Master's Degree

Length in Weeks: 50

Day

Night

Credits or Hours Awarded: 52

Unit of Credit: Semester

Quarter

Clock Hour 760

Minimum Number of Credits or Hours of General Education Required for Program Completion: 0





## ENROLLMENT DATA

Include only students enrolled in this program for the 12-month period being reported

1.	Enrollment in the program as of the beginning of this reporting period,	_____	5
2.	Additions during the year:		
	a. new program starts		5
	b. program re-entries		0
	c. transfers into the program from other programs at your institution		0
3.	<b>Total</b> program enrollment during the reporting period (add #1, #2a, #2b, and #2c)		10
4.	Of the total program enrollment (#3 above), how many:		
	a. enrolled without a high school diploma or equivalent?		2
	b. obtained a high school diploma or its equivalent while enrolled?		0
5.	Of the total program enrollment (#3 above), how many:		
	a. transferred out of the program to other programs at your institution?		0
	b. completed a program (see definition in instructions)?		0
	c. graduated from a program (see definition in instructions)?		4
	d. withdrew due to active military service?		0
	e. withdrew due to incarceration or death?		0
	f. withdrew from the institution?		1
	g. are still enrolled?		5
6.	What is the <b>total</b> of #5a through #5g? (must equal #3)		10
7.	Add #5b + #5c.		4
8.	Of the students listed in #7 above, how many enrolled without a high school diploma or equivalent?		1
9.	Of the number in #5d above, how many withdrew for related employment?		0
10.	As of the date this report was completed, how many students listed in #7 above were:		
	a. placed?		2
	b. placed out of field?		0
	c. not available for placement due to pregnancy, death or other health-related situations?		0
	d. not available for placement due to continuing education?		1
	e. not available due to active military service?		0
	f. not available due to incarceration?		0
	g. international students not available due to visa restrictions?		
	h. enrolled in stand-alone English as a Second Language Program?		1
	i. not working?		
11.	What is the <b>total</b> of #10a through #10i? (Must equal #7)		4

### CALCULATE YOUR INSTITUTION'S RETENTION AND PLACEMENT RATES FOR THIS PROGRAM

See formulas on page 4 of the instructions

**Program Retention**

90

**Program Placement**

66