

# Institution Data



## **Bureau for Private Postsecondary Education** Department of Consumer Affairs

### 2017 Annual Report

### Institution Data Workflow

(Printer Friendly Annual Report Instructions Document) ([https://www.bppe.ca.gov/annual\\_report/instructions.pdf](https://www.bppe.ca.gov/annual_report/instructions.pdf))

#### 2017 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 \*  
**2017**

2. Institution Code \*  
Enter institutional code (main location)  
**57476888**

3. Institution Name \*  
If a valid institution code is entered in question #2, the institution name will auto-populate. If not, enter manually.  
**Universal Healthcare Careers College**

4. Street Address (Physical Location) \*

**1625 West Olympic Blvd., Suite 708**

5. City \*

**Los Angeles**

6. State \*

**CA**

7. Zip Code \*

**90015**

8. Check all that apply to this institution: \*

**For profit institution , Corporation**

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 any branch location. If none, enter zero ("0")

**0**

## Fees / Accreditation

### 2017 BPPE Annual Report - Institution - Fees/Accreditation

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Display Instructions for #11 - #14 (Toggle)

**Not Checked**

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.

14. Has any accreditation agency taken any final disciplinary action against this institution? \*

**No**

## Financial

### 2017 BPPE Annual Report - Institution - Financial

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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 - #23 (Toggle)

**Not Checked**

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

**Yes**

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

**\$532,076.00**

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

**No**

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

**No**

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

**Yes**

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

**Yes**

19a. What is the total amount of WIOA funds received by your institution in this Reporting Year? \*

**\$0.00**

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

**Yes**

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

**Worker Compensation Vocational Rehabilitation**

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

**87**

22. 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**

23. 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".

**98**

## Offerings

### 2017 BPPE Annual Report - Institution - Offerings

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Display Instructions for #24 - #34 (Toggle)

**Checked**

# Instructions

(Printer Friendly Annual Report Instructions Document)

([https://www.bppe.ca.gov/annual\\_report/2016\\_annual\\_report.shtml](https://www.bppe.ca.gov/annual_report/2016_annual_report.shtml))

**24. Total number of students enrolled at this institution.** Indicate the number of students enrolled in all programs at your institution, minus the number of students who cancelled during the cancellation period, as of December 31

**25. Number of Doctorate Degree Programs Offered?** Indicate the number of Doctorate degree programs the institution offered for the reporting year.

**26. Number of Students enrolled in Doctorate programs at this institution?** Indicate the number of students enrolled in all Doctorate programs at your institution; number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolling during the year (through December 31) minus the number of students who cancelled during the cancellation period.

**27. Number of Master Degree Programs Offered?** Indicate the number of Master degree programs the institution offered for the reporting year.

**28. Number of Students enrolled in Master programs at this institution?** Indicate the number of students enrolled in all Master programs at your institution; number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolled during the year (through December 31) minus the number of students who cancelled during the cancellation period.

**29. Number of Bachelor Degree Programs Offered?** Indicate the number of Bachelor degree programs the institution offered for the reporting year.

**30. Number of Students enrolled in Bachelor programs at this institution?** Indicate the number of students enrolled in all Bachelor level programs at your institution; number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolled during the year (through December 31) minus the number of students who cancelled during the cancellation period.

**31. Number of Associate Degree Programs Offered?** Indicate the number of Associate degree programs offered for the reporting year.

**32. Number of Students enrolled in Associate programs at this institution?** Indicate the number of students enrolled in all Associate programs at your institution; number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolled during the year (through December 31) minus the number of students who cancelled during the cancellation period.

**33. Number of Diploma or Certificate Programs Offered?** Indicate the number of diploma or certificate programs offered during the reporting year.

**34. Number of Students enrolled in Diploma or Certificate programs at this institution?** Indicate the number of students enrolled in all diploma or certificate programs at your institution; Number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolled during the year (through December 31) minus the number of students who cancelled during the cancellation period.

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24. Total number of students enrolled at this institution \*  
If none, indicate "0".

**89**

25. Number of Doctorate Degree Programs Offered? \*  
If none, indicate "0".

**0**

26. Number of Students enrolled in Doctorate programs at this Institution? \*  
If none, indicate "0".

**0**

27. Number of Master Degree programs offered? \*  
If none, indicate "0".

**0**

28. Number of Students enrolled in Master programs at this institution? \*  
If none, indicate "0".

**0**

29. Number of Bachelor Degree programs offered? \*  
If none, indicate "0".

**0**

30. Number of Students enrolled in Bachelor programs at this institution? \*  
If none, indicate "0".

**0**

31. Number of Associate Degrees programs offered? \*

If none, indicate "0".

**0**

32. Number of Students enrolled in Associate programs at this institution? \*

If none, indicate "0".

**0**

33. Number of Diploma or Certificate Programs offered? \*

If none, indicate "0".

**2**

34. Number of Students enrolled in Diploma or Certificate programs at this institution? \*

If none, indicate "0".

**89**

Total Program Count

**2**

## Website / Uploads

### 2017 BPPE Annual Report - Institution - Website and Required Uploads

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**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.

Institution's Website

**[www.uhcc.edu](http://www.uhcc.edu)**

35. Upload School Performance Fact Sheet \*

Recommended file format = PDF

**2017 UHCC BPPE PERFORMANCE  
FACT SHEET MA-Ph.TECH FOR  
CALVET.pdf**

36. Upload Catalog \*

Recommended file format = PDF

**UHCC CATALOG 2017.pdf**

37. Upload Enrollment Agreement \*

Recommended file format = PDF

**UHCC CATALOG 2017.pdf**

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The file upload facility below (#38) is ONLY for use when BPPE requests additional supporting documentation. The initial submission of the Annual Report does not require any action below.

38. General File Upload (only use as directed by BPPE staff)  
Recommended file format = PDF

## Analyst Review

### Analyst Review

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Status

**Need Additional Information**

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Institutions: Please address all comments and checked items before re-submitting this workflow.

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Institution Comments Regarding Staff Comments Above, If Applicable:

2. School Performance Fact Sheet - Section 94910

**Other**

If 'Other' is indicated in #2, explain below.



**The SPFS formatting is not correct. Please see the SPFS that the school submitted last year. The reporting years are 2016/2017**

**There should be two SPFS based upon what was offered in 2017.**

INSTITUTIONS: Provide explanation or resolution for all items addressed in the School Performance Fact Sheet area, #2 above.

4. Enrollment Agreement - Section 74110 (d)

**Other**

If 'Other' is indicated in #4, explain below.

**Upload the enrollment agreement**

INSTITUTIONS: Provide explanation or resolution for all items addressed in the Enrollment Agreement area, #4 above.