

Institution Information Confirmation Document

Institution Code: 85210125

Institution Name: Medical Career College

All approved institutions are required to post links to the most current Annual Report submission, conspicuously on the homepage of their website. This document must be a part of the required Annual Report document package. Once the Bureau for Private Postsecondary Education staff alert you that your **entire submission** is complete, gather all of the confirmation documents received during the 2017 Annual Report review process.

Compile and merge all of the confirmation documents into one PDF file, in the following order:

- 1. One (1) 2017 Annual Report Submission Cover Sheet (sent when the Institution Data workflow is complete.)
- 2. One (1) 2017 Annual Report Institution Data Confirmation Document (sent when the Institution Data workflow is complete.)
- 3. All 2017 Annual Report Program Data Confirmation Documents (sent when each of the Program Data workflow is complete.)
- 3. All 2017 Annual Report Branch Location Data Confirmation Documents (sent when each of the Branch Data workflow is complete.)
- 3. All 2017 Annual Report Satellite Location Data Confirmation Documents (sent when each of the Satellite Data workflow is complete.)

Institution Data submitted:

Institution Data Tab:

1. Report Year: 2017

2. Institution Code: 85210125

3. Institution Name: Medical Career College

- 4. Street Address? 41300 Christy Street 5. City? Fremont 6. State? CA 7. Zip Code? 94538
- 8. Check all that apply to this institution: For profit institution, Corporation
- 9. Number of Branch Locations? 0 10. Number of Satellite Locations? 0

Fees/Accreditation Tab:

- 11. (a) Is this institution current with all assessments to the Student Tuition Recovery Fund? Yes
- 11. (b) 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

Accrediting Agency(ies): Accrediting Bureau of Health Education Schools

- 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 final disciplinary action against this institution? No

Financial Tab:

15. Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act? No

What is the total amount of Title IV funds received by your institution in this Reporting Year?

16. Does your institution participate in veterans' financial aid education programs? No

What is the total amount of veterans' financial aid funds received by your institution in this Reporting Year?

17. Does your institution participate in the Cal Grant program? No

What is the total amount of Cal Grant funds received by your institution in this Reporting Year?

- 18. Is your institution on the California's Eligible Training Provider List (ETPL)? No
- 19. Is your institution receiving funds from the Workforce Innovation and Opportunity Act (WIOA) Program? No

What is the total amount of WIOA funds received by your institution in this Reporting Year?

20. Does your Institution participate in, or offer any other government or non-governmental financial aid programs? No

If yes, please provide the name of the financial aid program.

- 21. The percentage of institutional income in 2017 that was derived from public funding. 0
- 22. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable. 0
- 23. 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. 0

Offerings Tab:

- 24. Total number of students enrolled at this institution? 277
- 25. Number of Doctorate Degree Programs Offered? 0
- 26. Number of Students enrolled in Doctorate programs at this institution? 0
- 27. Number of Master Degree Programs Offered? 0
- 28. Number of Students enrolled in Master programs at this institution? 0
- 29. Number of Bachelor Degree Programs Offered? 0
- 30. Number of Students enrolled in Bachelor programs at this institution? 0
- 31. Number of Associate Degree Programs Offered? 0
- 32. Number of Students enrolled in associate programs at this institution? 0
- 33. Number of Diploma or Certificate Programs Offered? 5
- 34. Number of Students enrolled in diploma or certificate programs at this institution? 277

Wesbite/Uploads Tab:

Institution Website: www.medicalcareercollege.us

- 35. School Performance Fact Sheet Upload: Medical Career College SPFS 2016-17.pdf
- 36. Catalog Upload: School Catalog (Updated 10-23-17).pdf
- 37. Enrollment Agreement Upload: Enrollment Agreement Form rev 11-8-18 Updated.pdf



Institution Code: 85210125

Institution Name: Medical Career College

Program: Medical Assistant

All approved institutions are required to post links to the most current Annual Report submission, conspicuously on the homepage of their website. This document must be a part of the required Annual Report document package. Once the Bureau for Private Postsecondary Education staff alert you that your entire submission is complete, gather all of the confirmation documents received during the 2017 Annual Report review process.

Compile and merge all of the confirmation documents into one PDF file, in the following order:

- 1. One (1) 2017 Annual Report Submission Cover Sheet (sent when the Institution Data workflow is complete.)
- 2. One (1) 2017 Annual Report Institution Data Confirmation Document (sent when the Institution Data workflow is complete.)
- 3. All 2017 Annual Report Program Data Confirmation Documents (sent when each of the Program Data workflow is complete.)
 3. All 2017 Annual Report Branch Location Data Confirmation Documents (sent when each of the Branch Data workflow is complete.)
- 3. All 2017 Annual Report Satellite Location Data Confirmation Documents (sent when each of the Satellite Data workflow is complete.)

Program Data submitted:

Program Data Tab:

1. Report Year: 2017

2. Institution Code: 85210125

3. Institution Name: Medical Career College

Program Name Tab:

4. Program Name: Medical Assistant

5. Degree/Program Level: Diploma/Certificate

5a. Degree/Program Level Other:

6. Degree/Program Title: Diploma/Certificate

6a. Degree/Program Title Other:

Financial and Graduation Tab:

7. Number of Degrees or Diplomas Awarded? 3	[- 발생 가지 생생님의 트리지 얼굴로 프로그램 (1980년 1985년) 그래 H 1985년	9. The percentage of enrolled students in 2017 receiving federal student loans to pay for this program. 0
10. The percentage of graduates in 2017 who took out federal student loans to pay for this program. 0	11. Number of Students Who Began the Program? 3	12. Students Available for Graduation? 3
13. On-time Graduates? 3	14. Completion Rate? 100	15. 150% Completion Rate? 0

16. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? Yes

Placement Data Tab:

CEC § 94929.5 requires institutions to 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.

17. Graduates Available for Employment? 3	18 Graduates Employed in the Field? 2	19. Placement Rate? 66.66667
20. Graduates Employed in the field		
20a. 20 to 29 hours per week? 0 20b. At leas	t 30 hours per week? 2	
21. Indicate the number of graduates employed		
21a. In a single position in the field of study: 0	21b. Concurrent aggregated positions in the field of study: 2	
21c. Freelance/self-employed: 0 21d. By the	institution or an employer owned by the institution, or an employer w	ho shares ownership with the institution: 0

Exam Passage Rate Tab:

- 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? Yes
- 22a. Do graduates have the option or requirement for more than one type of State licensing exam? Yes Option/Requirement #1: American Association of Medical Assistant

Option/Requirement #2: Option/Requirement #3:

Option/Requirement #4:

Exam Passage Rate - Year 1 Tab:

23. Name of the State licensing entity that licenses the field: Yes

24. Name of Exam? Medical Assistant Licensing

- 1				•
	25. Number of Graduates Taking State Exam? 3	26. Number Who Passed the State Exam? 3	27. Number Who Failed the State Exam? 0	28. Passage Rate? 100

29a. Name of Agency: American Association of Medical Assistants 29. Is This Data from the State Licensing Agency that Administered the Exam? Yes

30. If the response to #29 is "No", provide a description of the process used for Attempting to Contact Students.

Exam Passage Rate - Year 2 Tab:

31. Name of the State licensing entity that licenses the field: American Association of Medical Assistants

32. Name of Exam? Medical Assistant Licensing

nduates Taking State Exam? 0	34. Number Who Passed the State Exam? 0	35. Number Who Failed the State Exam? 0	36. Passage Rate?
------------------------------	---	---	-------------------

37a. Name of Agency: American Association of Medical Assistants 37. Is This Data from the State Licensing Agency that Administered the Exam? Yes

38. If the response to #37 is "No", provide a description of the process used for Attempting to Contact Students.

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 of study.

40. Graduates Employed in the Field of Study? 2 39, Graduates Available for Employment? 3

\$0 - \$5,000: 0	\$5,001 - \$10,000: 0	\$10,001 - \$15,000: 0	\$15,001 - \$20,000: 0	
\$20,001 - \$25,000: 0	\$25,001 - \$30,000: 0	\$30,001 - \$35,000: 2	\$35,001 - \$40,000: 0	
\$40,001 - \$45,000: 0	\$45,001 - \$50,000: 0	\$50,001 - \$55,000: 0	\$55,001 - \$60,000: 0	
\$60,001 - \$65,000: 0	\$65,001 - \$70,000: 0	\$70,001 - \$75,000: 0	\$75,001 - \$80,000: 0	
\$80,001 - \$85,000: 0	\$85,001 - \$90,000: 0	\$90,001 - \$95,000: 0	\$95,001 - \$100,000: 0	
Over \$100,001: 0	Α	Au La la la	- n - n	



Institution Code: 85210125

Institution Name: Medical Career College

Program: Nursing Assistant

All approved institutions are required to post links to the most current Annual Report submission, conspicuously on the homepage of their website. This document must be a part of the required Annual Report document package. Once the Bureau for Private Postsecondary Education staff alert you that your entire submission is complete, gather all of the confirmation documents received during the 2017 Annual Report review process.

nd merge all of the confirmation documents into one PDF file, in the following order:

- 1. One (1) 2017 Annual Report Submission Cover Sheet (sent when the Institution Data workflow is complete.)
- One (1) 2017 Annual Report Institution Data Confirmation Document (sent when the Institution Data workflow is complete.)
 All 2017 Annual Report Program Data Confirmation Documents (sent when each of the Program Data workflow is complete.)
- 3. All 2017 Annual Report Branch Location Data Confirmation Documents (sent when each of the Branch Data workflow is complete.)
 3. All 2017 Annual Report Satellite Location Data Confirmation Documents (sent when each of the Satellite Data workflow is complete.)

Program Data submitted:

Program Data Tab:

- 2. Institution Code: 85210125 1. Report Year: 2017
- 3. Institution Name: Medical Career College

Program Name Tab:

- 4. Program Name: Nursing Assistant
- 5. Degree/Program Level: Diploma/Certificate
- 5a. Degree/Program Level Other:
- 6. Degree/Program Title: Diploma/Certificate
- 6a. Degree/Program Title Other:

Financial and Graduation Tab:

7. Number of Degrees or Diplomas Awarded? 0	8. Total Charges for this Program? \$1,300.00	9. The percentage of enrolled students in 2017 receiving federal student loans to pay for this program. 0
10. The percentage of graduates in 2017 who took out federal student loans to pay for this program. 0	11. Number of Students Who Began the Program? 208	12. Students Available for Graduation? 208
13. On-time Graduates? 198	14. Completion Rate? 95.19231	15. 150% Completion Rate? 0

16, is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? Yes

Placement Data Tab:

CEC § 94929.5 requires institutions to 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.

17. Graduates Available for Employment? 198	18 Graduates Employed in the Field? 164	19. Placement Rate? 82.82828
20. Graduates Employed in the field		·
20a. 20 to 29 hours per week? 0 20b. At least 30) hours per week? 164	
21. Indicate the number of graduates employed		
21a. In a single position in the field of study: 0	21b. Concurrent aggregated positions in the field of study: 164	
21c. Freelance/self-employed: 0 21d. By the ins	titution or an employer owned by the institution, or an employer who	shares ownership with the institution: 0

Exam Passage Rate Tab:

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? Yes

22a. Do graduates have the option or requirement for more than one type of State licensing exam? Yes Option/Requirement #1: State Competency Testing thru American Red Cross Option/Requirement #2:

Option/Requirement #3: Option/Requirement #4:

Exam Passage Rate - Year 1 Tab:

23. Name of the State licensing entity that licenses the field: Yes

24. Name of Exam? State Competency Test

- 3				x
	25. Number of Graduates Taking State Exam? 198	26. Number Who Passed the State Exam? 198	27. Number Who Failed the State Exam? 0	28. Passage Rate? 100

29. Is This Data from the State Licensing Agency that Administered the Exam? Yes

29a. Name of Agency: American Red Cross

30. If the response to #29 is "No", provide a description of the process used for Attempting to Contact Students.

Exam Passage Rate - Year 2 Tab:

- 31. Name of the State licensing entity that licenses the field: CA Department of Public Health
- 32. Name of Exam? State Competency Test

33. Number of Graduates Taking State Exam? 196	34. Number Who Passed the State Exam? 196	35. Number Who Failed the State Exam? 0	36. Passage Rate? 100
--	---	---	-----------------------

- 37. Is This Data from the State Licensing Agency that Administered the Exam? Yes
 - 37a. Name of Agency: American Red Cross
- 38. If the response to #37 is "No", provide a description of the process used for Attempting to Contact Students.

- 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 of study.
- 39. Graduates Available for Employment? 198
- 40. Graduates Employed in the Field of Study? 164

30,000; 0 50,000; 0	\$30,001 - \$35,000: 164	\$35,001 - \$40,000: 0
50.000: 0	¢50,004, ¢55,000,0	
22/22212	\$50,001 - \$55,000: 0	\$55,001 - \$60,000: 0
70,000: 0	\$70,001 - \$75,000: 0	\$75,001 - \$80,000: 0
90,000: 0	\$90,001 - \$95,000: 0	\$95,001 - \$100,000: 0



Institution Code: 85210125

Institution Name: Medical Career College

Program: Home Health Aide

All approved institutions are required to post links to the most current Annual Report submission, conspicuously on the homepage of their website. This document must be a part of the required Annual Report document package. Once the Bureau for Private Postsecondary Education staff alert you that your entire submission is complete, gather all of the confirmation documents received during the 2017 Annual Report review process.

Compile and merge all of the confirmation documents into one PDF file, in the following order:

- 1. One (1) 2017 Annual Report Submission Cover Sheet (sent when the Institution Data workflow is complete.)
- 2. One (1) 2017 Annual Report Institution Data Confirmation Document (sent when the Institution Data workflow is complete.)
 3. All 2017 Annual Report Program Data Confirmation Documents (sent when each of the Program Data workflow is complete.)

- 3. All 2017 Annual Report Branch Location Data Confirmation Documents (sent when each of the Branch Data workflow is complete.)
 3. All 2017 Annual Report Satellite Location Data Confirmation Documents (sent when each of the Satellite Data workflow is complete.)

Program Data submitted:

Program Data Tab:

1. Report Year: 2017 2. Institution Code: 85210125

3. Institution Name: Medical Career College

Program Name Tab:

4. Program Name: Home Health Aide

5. Degree/Program Level: Diploma/Certificate

5a. Degree/Program Level Other:

6. Degree/Program Title: Diploma/Certificate

6a. Degree/Program Title Other:

Financial and Graduation Tab:

7. Number of Degrees or Diplomas Awarded? 0		9. The percentage of enrolled students in 2017 receiving federal student loans to pay for this program. 0
10. The percentage of graduates in 2017 who took out federal student loans to pay for this program. 0	11. Number of Students Who Began the Program? 10	12. Students Available for Graduation? 8
13. On-time Graduates? 8	14. Completion Rate? 100	15. 150% Completion Rate? 0

16. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? Yes

CEC § 94929.5 requires institutions to 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.

17. Graduates Available for Employment? 8	18 Graduates Employed in the Field? 8	19. Placement Rate? 100
20. Graduates Employed in the field		
20a. 20 to 29 hours per week? 0 20b. At least 30 hours p	er week? 8	
21. Indicate the number of graduates employed		
21a. In a single position in the field of study: 0 21b. Cond	current aggregated positions in the field of study: 8	
21c. Freelance/self-employed: 0 21d. By the institution of	or an employer owned by the institution, or an employer who sh	nares ownership with the institution: 0

Exam Passage Rate Tab:

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? No

22a. Do graduates have the option or requirement for more than one type of State licensing exam?

Option/Requirement #1: Option/Requirement #2:

Option/Requirement #3:

Option/Requirement #4:

Exam Passage Rate - Year 1 Tab:

23. Name of the State licensing entity that licenses the field: No

24. Name of Exam?

25. Number of Graduates Taking State Exam?	26. Number Who Passed the State Exam?	27. Number Who Failed the State Exam? 0	28. Passage Rate? 0

29. Is This Data from the State Licensing Agency that Administered the Exam?

30. If the response to #29 is "No", provide a description of the process used for Attempting to Contact Students.

Exam Passage Rate - Year 2 Tab:

31. Name of the State licensing entity that licenses the field:

32. Name of Exam?

<u> </u>			
33. Number of Graduates Taking State Exam?	34. Number Who Passed the State Exam?	35. Number Who Failed the State Exam? 0	36. Passage Rate? 0

37. Is This Data from the State Licensing Agency that Administered the Exam?

38. If the response to #37 is "No", provide a description of the process used for Attempting to Contact Students.

Salary Data Tab:

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 of study.

39. Graduates Available for Employment? 8 40. Graduates Employed in the Field of Study? 8

\$0 - \$5,000: 0	\$5,001 - \$10,000: 0	\$10,001 - \$15,000: 0	\$15,001 - \$20,000: 0
\$20,001 - \$25,000: 0	\$25,001 - \$30,000: 0	\$30,001 - \$35,000: 0	\$35,001 - \$40,000: 8
\$40,001 - \$45,000: 0	\$45,001 - \$50,000: 0	\$50,001 - \$55,000: 0	\$55,001 - \$60,000: 0
\$60,001 - \$65,000: 0	\$65,001 - \$70,000: 0	\$70,001 - \$75,000: 0	\$75,001 - \$80,000: 0
\$80,001 - \$85,000: 0	\$85,001 - \$90,000: 0	\$90,001 - \$95,000: 0	\$95,001 - \$100,000: 0
Over \$100,001: 0			



Institution Code: 85210125

Institution Name: Medical Career College

Program: Acute Care CNA Program

All approved institutions are required to post links to the most current Annual Report submission, conspicuously on the homepage of their website. This document must be a part of the required Annual Report document package. Once the Bureau for Private Postsecondary Education staff alert you that your entire submission is complete, gather all of the confirmation documents received during the 2017 Annual Report review process.

Compile and merge all of the confirmation documents into one PDF file, in the following order:

- 1. One (1) 2017 Annual Report Submission Cover Sheet (sent when the Institution Data workflow is complete.)

- 2. One (1) 2017 Annual Report Institution Data Confirmation Document (sent when the Institution Data workflow is complete.)
 3. All 2017 Annual Report Program Data Confirmation Documents (sent when each of the Program Data workflow is complete.)
 3. All 2017 Annual Report Branch Location Data Confirmation Documents (sent when each of the Branch Data workflow is complete.)
- 3. All 2017 Annual Report Satellite Location Data Confirmation Documents (sent when each of the Satellite Data workflow is complete.)

Program Data submitted:

Program Data Tab:

- 1. Report Year: 2017 2. Institution Code: 85210125
- 3. Institution Name: Medical Career College

Program Name Tab:

- 4. Program Name: Acute Care CNA Program
- 5. Degree/Program Level: Diploma/Certificate
- 5a. Degree/Program Level Other:
- 6. Degree/Program Title: Diploma/Certificate
- 6a. Degree/Program Title Other:

Financial and Graduation Tab:

7. Number of Degrees or Diplomas Awarded? 17		9. The percentage of enrolled students in 2017 receiving federal student loans to pay for this program. 0
10. The percentage of graduates in 2017 who took out federal student loans to pay for this program. 0	11. Number of Students Who Began the Program? 18	12. Students Available for Graduation? 17
13. On-time Graduates? 17	14. Completion Rate? 100	15. 150% Completion Rate? 0

16. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? Yes

Placement Data Tab:

CEC § 94929.5 requires institutions to 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.

17. Graduates Available for Employment? 17	18 Graduates Employed in the Field? 12	19. Placement Rate? 70.58824		
20. Graduates Employed in the field				
20a. 20 to 29 hours per week? 0 20b. At least 30 hours per week? 12				
21. Indicate the number of graduates employed				
21a. In a single position in the field of study: 0 21b. Concurrent aggregated positions in the field of study: 12				
21c. Freelance/self-employed: 0 21d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution: 0				

Exam Passage Rate Tab:

- 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? No
- 22a. Do graduates have the option or requirement for more than one type of State licensing exam?
 - Option/Requirement #1:

 - Option/Requirement #2: Option/Requirement #3: Option/Requirement #4:

Exam Passage Rate - Year 1 Tab:

23. Name of the State licensing entity that licenses the field: No

24. Name of Exam?

Name and the same			1
25. Number of Graduates Taking State Exam?	26. Number Who Passed the State Exam?	27. Number Who Failed the State Exam? 0	28. Passage Rate? 0

29a. Name of Agency:

29. Is This Data from the State Licensing Agency that Administered the Exam?

30. If the response to #29 is "No", provide a description of the process used for Attempting to Contact Students.

Exam Passage Rate - Year 2 Tab:

31. Name of the State licensing entity that licenses the field:

32. Name of Exam?

33. Number of Graduates Taking State Exam?	34. Number Who Passed the State Exam?	35. Number Who Failed the State Exam? 0	36. Passage Rate? 0
		1	4

37. Is This Data from the State Licensing Agency that Administered the Exam?

37a. Name of Agency:

38. If the response to #37 is "No", provide a description of the process used for Attempting to Contact Students.

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 of study.

39. Graduates Available for Employment? 17

40. Graduates Employed in the Field of Study? 12

\$30,001 - \$35,000: 12 \$50,001 - \$55,000: 0	\$35,001 - \$40,000: 0 \$55,001 - \$60,000: 0
\$50,001 - \$55,000: 0	\$55,001 - \$60,000: 0
\$70,001 - \$75,000: 0	\$75,001 - \$80,000: 0
\$90,001 - \$95,000: 0	\$95,001 - \$100,000: 0
	\$90,001 - \$95,000: 0



Institution Code: 85210125

Institution Name: Medical Career College

Program: Hemodialysis Technician

All approved institutions are required to post links to the most current Annual Report submission, conspicuously on the homepage of their website. This document must be a part of the required Annual Report document package. Once the Bureau for Private Postsecondary Education staff alert you that your entire submission is complete, gather all of the confirmation documents received during the 2017 Annual Report review process.

Compile and merge all of the confirmation documents into one PDF file, in the following order:

- 1. One (1) 2017 Annual Report Submission Cover Sheet (sent when the Institution Data workflow is complete.)
- One (1) 2017 Annual Report Institution Data Confirmation Document (sent when the Institution Data workflow is complete.)
 All 2017 Annual Report Program Data Confirmation Documents (sent when each of the Program Data workflow is complete.)

- 3. All 2017 Annual Report Branch Location Data Confirmation Documents (sent when each of the Branch Data workflow is complete.)
 3. All 2017 Annual Report Satellite Location Data Confirmation Documents (sent when each of the Satellite Data workflow is complete.)

Program Data submitted:

Program Data Tab:

1. Report Year: 2017

2. Institution Code: 85210125

3. Institution Name: Medical Career College

Program Name Tab:

- 4. Program Name: Hemodialysis Technician
- 5. Degree/Program Level: Diploma/Certificate
- 5a. Degree/Program Level Other:
- 6. Degree/Program Title: Diploma/Certificate
- 6a. Degree/Program Title Other:

Financial and Graduation Tab:

7 Number of Degrees or Dinjomas Awarded? 31		9. The percentage of enrolled students in 2017 receiving federal student loans to pay for this program. 0
10. The percentage of graduates in 2017 who took out federal student loans to pay for this program. 0	11. Number of Students Who Began the Program? 38	12. Students Available for Graduation? 31
13. On-time Graduates? 31	14. Completion Rate? 100	15. 150% Completion Rate? 0

16. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? Yes

Placement Data Tab:

CEC § 94929.5 requires institutions to 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.

17. Graduates Available for Employment? 31	18 Graduates Employed in the Field? 17	19. Placement Rate? 54.83871
20. Graduates Employed in the field		
20a. 20 to 29 hours per week? 0 20b. At least 30 hour	s per week? 17	
21. Indicate the number of graduates employed		
21a. In a single position in the field of study: 0 21b. Co	oncurrent aggregated positions in the field of study: 17	
21c. Freelance/self-employed: 0 21d. By the institutio	n or an employer owned by the institution, or an employer wh	o shares ownership with the institution: 0

Exam Passage Rate Tab:

- 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? Yes
- 22a. Do graduates have the option or requirement for more than one type of State licensing exam? Yes

Option/Requirement #1: California Dialysis Council
Option/Requirement #2:

Option/Requirement #3: Option/Requirement #4:

Exam Passage Rate - Year 1 Tab:

- 23. Name of the State licensing entity that licenses the field: Yes
- 24. Name of Exam? State Competency Test under California Dialysis Council

17		, , , , , , , , , , , , , , , , , , , ,		
	25. Number of Graduates Taking State Exam? 31	26. Number Who Passed the State Exam? 31	27. Number Who Failed the State Exam? 0	28. Passage Rate? 100

29. Is This Data from the State Licensing Agency that Administered the Exam? Yes 29a. Name of Agency: California Dialysis Council

30. If the response to #29 is "No", provide a description of the process used for Attempting to Contact Students.

Exam Passage Rate - Year 2 Tab:

- 31. Name of the State licensing entity that licenses the field: CA Department of Public Health
- 32. Name of Exam? State Competency Test thru California Dialysis Council

3. Number of Graduates Taking State Exam? 14	34. Number Who Passed the State Exam? 14	35. Number Who Failed the State Exam? 0	36. Passage Rate? 100
--	--	---	-----------------------

- 37. Is This Data from the State Licensing Agency that Administered the Exam? Yes 37a. Name of Agency: California Dialysis Council
- 38. If the response to #37 is "No", provide a description of the process used for Attempting to Contact Students.

- 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 of study.
- 40. Graduates Employed in the Field of Study? 17 39. Graduates Available for Employment? 31

\$0 - \$5,000: 0	\$5,001 - \$10,000: 0	\$10,001 - \$15,000: 00	\$15,001 - \$20,000: 0
\$20,001 - \$25,000: 0	\$25,001 - \$30,000: 14	\$30,001 - \$35,000: 3	\$35,001 - \$40,000: 0
\$40,001 - \$45,000: 0	\$45,001 - \$50,000: 0	\$50,001 - \$55,000: 0	\$55,001 - \$60,000: 00
\$60,001 - \$65,000: 0	\$65,001 - \$70,000: 0	\$70,001 - \$75,000: 0	\$75,001 - \$80,000: 0
\$80,001 - \$85,000: 00	\$85,001 - \$90,000: 0	\$90,001 - \$95,000: 0	\$95,001 - \$100,000: 0
Over \$100,001: 0	Α		· · · · · · · · · · · · · · · · · · ·