Institution Data



2017 Annual Report Institution Data Workflow

(Printer Friendly Annual Report Instructions Document) (https://www.bppe.ca.gov/annual_report/instructions.pdf)

2017 BPPE Annual Report - Institution - General Info

Annual Report data is institutional data that is combined for the main location, branch and all satellite locations.

- Report Year *
 2017
- Institution Code *
 Enter institutional code (main location)
 1942381
- 3. Institution Name *
 If a valid institution code is entered in question #2, the institution name will auto-populate. If not, enter manually.

 Millennia Education Institute
- Street Address (Physical Location) *9440 Telstar Ave. #6

2017 BPPE Annual Report - Institution - Financial

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? *
No

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)? * No

9. Is your institution receiving funds from the Work Innovation and Opportunity Act (WIOA) Program? * No

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) * No

28. Number of Students enrolled in Master programs at this institution? *

If none, indicate "0".

V

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".

(

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".

1

34. Number of Students enrolled in Diploma or Certificate programs at this institution? * If none, indicate "0".

13

Total Program Count

1

Website / Uploads

2017 BPPE Annual Report - Institution - Website and Required Uploads

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.millenniaedu.org

35. Upload School Performance Fact Sheet * Recommended file format = PDF pfs.pdf

36. Upload Catalog *
Recommended file format = PDF
MEI_Catalog 2019 010219
pdf.pdf

37. Upload Enrollment Agreement

*
Recommended file format = PDF
MEI_Enrollment
Agreement_04202018.doc.pdf

The file upload facility below (#38) is ONLY for use when BPPE requests additional supporting documentation. The inital 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

Status

Need Additional Information

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

Staff Comments:

Please make the edits you requested.

nstitution Comments Regarding Staff Comments Above, If Applicable:

Institution Information



Bureau for Private Postsecondary Education

Department of Consumer Affairs

2017 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document) (https://www.bppe.ca.gov/annual_report/instructions.pdf)

2017 BPPE Annual Report - Program - Institution Data

Complete one 'Program Data' workflow (all applicable sections) for <u>EACH</u> educational program offered at the institution. If an institution offers the same program at the main ocation and a branch location, add the data together and submit one number for the program being reported.

- Report Year *
 2017
- 2. Institution Code *
 Enter institutional code (main location)
 1942381
- 3. Institution Name *
 If a valid institution code is entered in question #2, the institution name will auto-populate. If not, enter manually.

 Millennia Education Institute

Program Name

2017 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #6 (Toggle) Not Checked

- 4. Name of Program * Hemodialysis technician training program
- Degree/Program Level * Diploma/Certificate
- 6. Degree/Program Title * Diploma/Certificate

Financial and Graduation

2017 BPPE Annual Report - Program - Financial Data and **Graduation Rates**

Display Instructions for #7 - #16 (Toggle) Not Checked

- 7. Number of Degrees or Diplomas Awarded * If none, indicate "0".
- 9. The percentage of enrolled students in 2017 receiving federal student loans to pay for this program * 0
- 11. Number of Students Who Began the Program * If none, indicate "0".
- 13. Number of On-time Graduates

If none, indicate "0". 12

- 8. Total Charges for this Program * \$6,700.00
- 10. The percentage of graduates in 2017 who took out federal student loans to pay for this program * 0
- 12. Number of Students Available for Graduation * If none, indicate "0". 13
- 14. Completion Rate * This is a calculated field based on #12 and #13. 92.30769
- 15. 150% Completion Rate

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

Placement Data

2017 BPPE Annual Report - Program - Placement Data

Display Instructions for #17 - #21 (Toggle)
Not Checked

17. Graduates Available for

Employment *
If none, indicate "0".

12

18. Graduates Employed in the

Field *

If none, indicate "0".

9

19. Placement Rate
This is a calculated field based on #17 and #18.

75

20. Graduates employed in the field...

20a. 20 to 29 hours per week * If none, indicate "0".

U

20b. at least 30 hours per week * If none, indicate "0".

9

21. Indicate the number of graduates employed...

21a. In a single position in the field of study * If none, indicate "0".

0

21b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) * If none, indicate "0".

0

21c. Freelance/self-employed *
If none, indicate "0".

21d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".

O

Exam Passage Rate

2017 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #22 (Toggle)

Not Checked

22. Does this educational program lead to an occupation that requires State licensing?

Yes

You have indicated "Yes" for question #22, please complete #22a below and the following screens with the required Exam Passage Rate data for 2016 and 2017. (Two years of data is required.)

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

No

Exam Passage Rate - Year 1

2017 BPPE Annual Report - Program - Exam Passage Rate Data - 2017

Display Instructions for #23-30 (Toggle)
Not Checked

23. Name of the State licensing entity that licenses this field *Certified Hemodialysis Technician Certificate

24. Name of State Exam *
Certificate Hemodialysis Technician Testing

25. Number of Graduates Taking State Exam * If none, indicate "0".

13

26. Number Who Passed the State Exam * If none, indicate "0".

27. Number Who Failed the State Exam This is a calculated field based on #25 and #26.

28. Passage Rate
This is a calculated field based on #25 and #26.
92.30769

29. Is this data from the State licensing agency that administered the exam? *

Yes

29a. Name of Agency *
California Dialysis Council

- xam Passage Rate - Year 2

2017 BPPE Annual Report - Program - Exam Passage Rate Data - 2016

Display Instructions for #31-38 (Toggle)
Checked

Instructions

(Printer Friendly Annual Report Instructions Document) (https://www.bppe.ca.gov/annual_report/2016_annual_report.shtml)

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.

- **31. Name of the State licensing entity that licenses the field.** Enter the name of the State licensing entity.
- 32. Name of Exam? Provide the name of the State exam being reported.
- 33. 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)).
- **34. 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)).
- **35. 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)).
- **36.Passage Rate?** Enter the passage rate for graduates who took the State exam and passed it on the first attempt.
- 37. Is This Data from the State Licensing Agency that Administered the Exam? (5 CCR § 74112(j)). If yes, enter the name of the Agency.
- 38. If the response to #37 is "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)).
- 31. Name of the State licensing entity that licenses this field *
 California Dialysis Council
- 32. Name of State Exam *
 Certified Hemodialysis Technician Exam
- 33. Number of Graduates Taking State Exam * If none, indicate "0".

 12
- 34. Number Who Passed the State Exam * If none, indicate "0".

 12

35. Number Who Failed the State Exam This is a calculated field based on #33 and #34.

36. Passage Rate
This is a calculated field based on #33 and #34.

100

37. Is this data from the State licensing agency that administered the State exam? *
Yes

37a. Name of Agency *
California Dialysis Council

Salary Data

2017 BPPE Annual Report - Program - Salary Data

Display Instructions for #39-41 (Toggle)

Not Checked

39. Graduates Available for Employment
This field is auto-populated based on your entry in #17.

12

40. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
9

41. Graduates Employed in the Field Reported receiving the following Salary or Wage:

For graduates employed in the field, indicate their salaries/earnings below. If there are none in any specific range, indicate "0."

\$40,001 - \$45,000 * 0
\$50,001 - \$55,000 * 0
\$60,001 - \$65,000 * 0
\$70,001 - \$75,000 * 0
\$80,001 - \$85,000 * 0
\$90,001 - \$95,000 * 0
Over \$100,000 * 0

Analyst Review

Analyst Review

Status

Need Additional Information

Staff Comments:

Please make the edits you need.

Institution Comments Regarding Staff Comments Above, If Applicable: