

**SUMMARY DATA FORM (WASC/02)**

**INSTITUTION:** \_\_\_\_\_

**PRESIDENT/CEO:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**1. YEAR FOUNDED:** \_\_\_\_\_ **2. CALENDAR PLAN:** \_\_\_\_\_

**3. DEGREE LEVELS OFFERED:** \_\_\_\_\_ Associate \_\_\_\_\_ Bachelors  
\_\_\_\_\_ Masters \_\_\_\_\_ Doctorate  
\_\_\_\_\_ Professional

**4. SPONSORSHIP AND CONTROL** \_\_\_\_\_

<b>5. CURRENT ENROLLMENT:</b>	<u>Headcount</u>	<u>% Minority</u>	<u>FTE</u>
A. Undergraduate	_____	_____	_____
B. Graduate	_____	_____	_____
C. Non-degree	_____	_____	_____
TOTAL	_____	_____	_____

**6. CURRENT FACULTY:** Full-time \_\_\_\_\_ % Minority \_\_\_\_\_  
Part-time \_\_\_\_\_ % Minority \_\_\_\_\_

**7. FINANCES**

A. Annual Tuition Rate: \_\_\_\_\_ Undergraduate \_\_\_\_\_ Graduate  
B. Total Annual Operating Budget: \_\_\_\_\_ C. % from tuition and fees \_\_\_\_\_  
D. Operating deficit(s) for past 3 years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
E. Current Accumulated Deficit: \_\_\_\_\_

**8. GOVERNING BOARD:** A. Size \_\_\_\_\_ B. Meetings a year \_\_\_\_\_

**9. OFF-CAMPUS LOCATIONS:** A. Number \_\_\_\_\_ B. Total Enrollment \_\_\_\_\_

**10. LIBRARY:** A. Number of Volumes \_\_\_\_\_  
B. Number of Periodical Subscriptions \_\_\_\_\_