



**2010 ANNUAL REPORT**

Use fall 2009 data in completing the web survey.

**Definitions generally align with USDOE and IPEDS definitions, and NWCCU policies. The deadline for completion of the 2010 Annual Report is June 1, 2010.**

Name of Institution \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Main Phone Number \_\_\_\_\_

1. Chief Executive Officer: \_\_\_\_\_

Title (Dr., Rev., Mr., Ms., etc.): \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ FAX \_\_\_\_\_

Position \_\_\_\_\_ E-mail \_\_\_\_\_

2. Accreditation Liaison Officer (ALO): \_\_\_\_\_

Title (Dr., Rev., Mr., Ms., etc.): \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ FAX \_\_\_\_\_

Position \_\_\_\_\_ E-mail \_\_\_\_\_

3. Institution Type (check one):  Public  Tribal/Native  Private Non-Profit  Private For-Profit

4. Degree Levels Offered (check all that apply):  Associate  Baccalaureate  Masters  Doctorate

5. Have changes been made in the Articles of Incorporation and/or By-Laws since the 2008 Annual Report was filed? If yes, please send a copy of the revised document(s) to [reports@nwccu.org](mailto:reports@nwccu.org).  Yes  No

6. Calendar plan (semester, quarter, 4-1-4, trimester, other) \_\_\_\_\_

<b>7. <u>Students</u> (All locations)</b>	<u>Unduplicated Headcount</u>	<u>Full-Time Equivalent (FTE)</u>
(a) undergraduate	_____	_____
(b) graduate (if applicable)	_____	_____
(c) unclassified	_____	_____
<b>Totals</b>	_____	_____

<b>8. <u>Faculty</u> (All locations)</b>	<u>Unduplicated Headcount</u>	<u>Full-Time Equivalent (FTE)</u>
(a) Full-Time	_____	_____
(b) Part-Time	_____	_____
<b>Totals</b>	_____	_____

9. Institutional Finances

**Expenses (please see definition on website)** (a) \$ \_\_\_\_\_

<http://www.nwccu.org/Pubs%20Forms%20and%20Updates/Forms/ARFAO.htm#9>

*All Institutions Respond. If NONE, so indicate.*

<b>Operating Deficit</b>		\$ _____
<b>Accumulated Deficit</b>		\$ _____

10. Cohort default rate on Title IV, HEA subsidized and unsubsidized loans in which the student is the designated borrower for the

cohort fiscal year of 2007 ending September 30, 2008. Do not include loans made directly to parents, such as PLUS loans:

**Cohort fiscal year 2007**                      **Default Rate** \_\_\_\_\_ %

11. Does your institution use its accreditation or pre-accreditation with the Northwest Commission on Colleges and Universities to establish eligibility to participate in Higher Education Act (HEA) programs, including Title IV funding?  Yes  No

12. New degree/certificate programs offered since your 2009 Annual Report was filed. If **NONE**, so indicate.

<u>Certificate/Degree Level</u>	<u>Program Name</u>	<u>Discipline or Program Area</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

13. Degree/Certificate programs of 30 semester/45 quarter credits or more in length terminated in 2009-2010. If **NONE**, so indicate.

<u>Certificate/Degree Level</u>	<u>Program Name</u>	<u>Discipline or Program Area</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

14. Contractual relationships with non-accredited organizations. (See Commission Policy A-6) If **NONE**, so indicate.  
List academic credit program(s)/course(s) operated jointly in contractual relationships with external organizations. Exclude student teaching partnerships, research contracts, contracts for non-credit offerings, etc.

<u>Degree/Certificate Level</u>	<u>Program(s)/Course(s) Name(s)</u>	<u>External Agency/Organization</u>	<u>Student Headcount</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

15. Substantive Changes including degree or certificate programs planned for 2010-2011. (See Commission Policy A-2) If **NONE**, so indicate.

<u>Certificate/Degree Level</u>	<u>Program Name</u>	<u>Discipline or Program Area</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



