Institution Data

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Institution Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Institution - General Info

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

1. Report Year *
2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.
25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.
High Desert Medical College

4. Street Address (Physical Location) *
701 West Avenue K STE 123

5. City *
:amcaster

6. State *
CA

7. Zip Code *
93534

8. Select the type of business organization for this institution *
For profit corporation

9. Number of Branch Locations *
Indicate the number of branch locations associated with the main location. If none, enter zero ("0")
2

10. Number of Satellite Locations *
Indicate the number of branch locations associated with the main location or branch location. If none, enter zero ("0")
1

Graduate Identification Data

2024 BPPE Annual Report - Institution - Graduate Identification Data

New Reporting Requirement: California Education Code section 94892.6 requires that institutions approved to operate by the Bureau collect, retain, and report specified information about each graduate completing a program on or after January 1, 2020. This includes identifying information for each graduate along with information about the program from which they graduated and the amount of student loan debt borrowed. Pursuant to Title 5, California Code of Regulations section 74110, beginning in 2022 institutions will report this information to the Bureau annually through the Annual Report submission process.

The AR_LaborMarketData_2024 reporting template linked below includes details about the data required to be reported for each student who graduated from the institution's education program(s) between January 1, 2024 and December 31, 2024. Click on the link to the template and save to your computer to fill out. After adding the required information to the "Data" tab, press the "Select files" button at the bottom of the portal Graduate Identification Data page to upload and attach your completed AR_LaborMarketData_2024 report to the institution's Annual Report submission. Uploaded files must be in Excel or CSV formats.

Please contact Jennifer Jones (Jennifer.jones@dca.ca.gov) with questions about this requirement.

AR_LaborMarketData_2024.xlsx

Upload completed Excel or CSV here *
AR_LaborMarketData_2024.xlsx

Fees / Accreditation

2024 BPPE Annual Report - Institution - Fees/Accreditation

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 Council for Continuing Education and Training

13. If your institution has specialized accreditation from a recognized United States Department of Education approved specialized/programmatic accreditor, list the accreditation below.

BVNPT, CDPH

14. Has any accreditation agency taken any final disciplinary action against this institution in the reporting year? Indicate "yes" if the institution has had final disciplinary action taken against it by an accreditation agency; Indicate "no" if no final action has been taken against the institution by an accreditation agency. If Yes, please upload a copy of the action at #14a. *

No

Financial

2024 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 - #26 (Toggle)
Checked

Instructions

(Printer Friendly Annual Report Instructions Document)

21. Provide the percentage of institutional income in the Report Year derived from public funding. (Add #15, #16, #17, and #19. Divide the sum by Institution's Total Revenue) All money that is generated by the government to provide services to the general public is "public funding."

23. Provide the percentage of institutional income during this reporting year derived from any non-government financial aid. All non-government financial aid divided by total revenue.

24. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable. The Cohort Default Rate (CDR) represents the percentage of this institution's students that failed to make required payments on their federal loans within three years of when they were required to begin repayment of that loan.

15. Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act? (This includes federal loans and grants) *

Yes

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

$32,067,687.85

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

Yes

16a. What is the total amount of veterans' financial aid funds received by your institution in this Reporting Year? *

$1,422,440.40

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

Yes

17a. What is the total amount of Cal Grant Funds received by your institution in this Reporting Year? *

$148,990.64

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? *

$49,375.00

20. Does your Institution participate in, or offer, any other state or federal government financial aid programs? (i.e., vocational rehab…) *

Yes

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

Vocational Rehab

20b. What is the total amount of any other state or federal funds received by your institution in the reporting year? *

$13,307.50

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

87

22. Does your Institution participate in, or offer any non-government financial aid programs? (i.e., private grants/loans, institutional grants/loans) *

Yes

22a. You indicated "Yes" for #22, please provide the name of the financial aid programs below.

Private loan, Institutional loans and scholarships

23. The percentage of institutional income in the reporting year derived from any non-government financial aid. *

4.9

24. 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

25. 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".

80

26. Provide the average amount of federal student loan debt of graduates who took out federal student loans at this institution. *

$13,967.87

Offerings

2024 BPPE Annual Report - Institution - Offerings

Display Instructions for #27 - #37 (Toggle)
Checked

Instructions

(Printer Friendly Annual Report Instructions Document)

27. Total number of students enrolled at this institution in the reporting year. Indicate the number of students attending and/or enrolled in all programs at your institution (minus the number of students in the reporting year who cancelled during the cancellation period) January 1st through December 31st.

28. Number of Doctorate Degree Programs Offered? Indicate the number of Doctorate degree Programs the institution offered for the reporting year. (Number of Programs not Students)

29. Number of Students enrolled in Doctorate programs at this institution? Indicate the number of students enrolled and/or active in all Doctorate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

30. Number of Master Degree Programs Offered? Indicate the number of Master degree Programs the institution offered for the reporting year. (Number of Programs not Students)

31. Number of Students enrolled in Master programs at this institution? Indicate the number of students enrolled and/or active in all Master programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

32. Number of Bachelor Degree Programs Offered? Indicate the number of Bachelor degree Programs the institution offered for the reporting year. (Number of Programs not Students)

33. Number of Students enrolled in Bachelor programs at this institution? Indicate the number of students enrolled and/or active in all Bachelor programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

34. Number of Associate Degree Programs Offered? Indicate the number of Associate degree Programs offered for the reporting year. (Number of Programs not Students)

35. Number of Students enrolled in Associate programs at this institution? Indicate the number of students enrolled and/or active in all Associate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

36. Number of Diploma or Certificate Programs Offered? Indicate the number of Diploma or Certificate Programs offered for the reporting year. (Number of Programs not Students)

37. Number of Students enrolled in diploma or certificate programs at this institution? Indicate the number of students enrolled and/or active in all diploma/certificate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

---

27. Total number of students enrolled at this institution in the reporting year. Indicate the number of students attending and/or enrolled in all programs at your institution (minus the number of students in the reporting year who cancelled during the cancellation period) January 1st through December 31st . *
If none, indicate "0".

3229

28. Number of Doctorate Degree Programs Offered? Indicate the number of Doctorate degree Programs the institution offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

29. Number of Students enrolled in Doctorate programs at this institution? Indicate the number of students enrolled and/or active in all Doctorate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

30. Number of Master Degree Programs Offered? Indicate the number of Master degree Programs the institution offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

31. Number of Students enrolled in Master programs at this institution? Indicate the number of students enrolled and/or active in all Master programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

32. Number of Bachelor Degree Programs Offered? Indicate the number of Bachelor degree Programs the institution offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

33. Number of Students enrolled in Bachelor programs at this institution? Indicate the number of students enrolled and/or active in all Bachelor programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

34. Number of Associate Degree Programs Offered? Indicate the number of Associate degree Programs offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

6

35. Number of Students enrolled in Associate programs at this institution? Indicate the number of students enrolled and/or active in all Associate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

1412

36. Number of Diploma or Certificate Programs Offered? Indicate the number of Diploma or Certificate Programs offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

13

37. Number of Students enrolled in diploma or certificate programs at this institution? Indicate the number of students enrolled and/or active in all diploma/certificate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

1817

Total Program Count

19

Website / Uploads

2024 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.

Uploads for Documents must be in PDF format. Other formatting may be too large to upload and will be rejected by BPPE staff.

Institution's Website

https://hdmc.edu

38. Upload School Performance Fact Sheet *
Required file format = PDF

2023-24 HDMCall spfs.pdf

39. Upload Catalog *
Required file format = PDF

HDMC Catalog Updated 11 14 2024.pdf

40. Upload Enrollment Agreement *
Required file format = PDF

HDMC EA 6 19 2025.pdf

The file upload facility below (#41) is ONLY for use when BPPE requests additional supporting documentation. The inital submission of the Annual Report does not require any action below.

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

Pursuant to 5 CCR § 74110 (f)(6), **financial statements are required to be submitted via mail in hard copy format to the Bureau and attention to the Annual Report Unit**; however, the institution may in addition upload an electronic version. This is optional.

42. Upload Financial Statements
Recommended file format = PDF

Bureau for Private Postsecondary Education
Department of Consumer Affairs

2024 Annual Report

Branch Location Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Branch Location Data

1. Report Year *
2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #4.
25860907

3. School Code *
Enter school code (branch location)
73116984

4. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.
High Desert Medical College

Branch Data (California locations only)

5. Total number of students at this branch location? *
Enter "0" if none.
998

6. Name of Programs offered at this branch location? *
Separate each program name with a comma or enter `None"
Associate of Applied Science in Surgical Technology, Cardiac Sonography Associate of Applied Science, Clinical Medical Assisting, Dental Assisting, Magnetic Resonance Imaging Associate of Applied Science, Medical Administrative Assisting, Medical Billing and Coding, Nursing Assistant, Pharmacy Technician, Sterile Processing Technician, Ultrasdound Technician, Ultrasound Technician Associate of Applied Science, Veterinary Assistant, Vocational Nursing, Vocational Nursing Associate of Applied Science, Vocational Nursing Pre-Requisite Course

7. Street Address (physical location) *
2000 24th Street

8. City *
Bakersfield

9. State *
CA

10. Zip Code *
93301

Bureau for Private Postsecondary Education
Department of Consumer Affairs

2024 Annual Report

Branch Location Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Branch Location Data

1. Report Year *
2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #4.
25860907

3. School Code *
Enter school code (branch location)
73078818

4. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.
High Desert Medical College

Branch Data (California locations only)

6. Name of Programs offered at this branch location? *
Separate each program name with a comma or enter `None"
Associate of Applied Science In Surgical Technology, Cardiac Sonography Associate of Applied Science, Clinical Medical Assisting, Dental Assisting, Emergency Medical Technician, Magnetic Resonance Imaging Associate of Applied Science, Medical Administrative Assisting, Medical Billing and Coding, Nursing Assistant, Pharmacy Technician, Sterile Processing Technician, Ultrasound Technician, Ultrasound Technician Associate of Applied Science, Veterinary Assistant, Vocational Nursing, Vocational Nursing Associate of Applied Science, Vocational Nursing Pre-Requisite Course

5. Total number of students at this branch location? *
Enter "0" if none.
880

7. Street Address (physical location) *
31625 De Portola Rd, Suite 200

8. City *
Temecula

9. State *
CA

10. Zip Code *
92952

Satellite Location Data

Bureau for Private Postsecondary Education
Department of Consumer Affairs

2024 Annual Report

Satellite Location Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Satellite Location Data

1. Report Year *
2024

2. Institution Code *
Enter Institutional Code, main or branch, associated with this satellite location. Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #4.
25860907

3. School Code *
Enter school code (Satellite Location)
73078818

4. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.
High Desert Medical College

Satellite Location Data (California locations only)

5. Street Address (Physical Location) *
40575 California Oaks Rd, Unit D9

6. City *
Murrieta

7. State *
CA

8. Zip Code *
92562

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Associate Degree Nursing

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Associate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.1601 - Nursing/Registered Nurse (RN, ASN, BSN, MSN).

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

29-1141 - Registered Nurses

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

0

9. Total Charges for this Program *

$0.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

0

13. Number of Students Available for Graduation *
If none, indicate "0".

0

14. Number of On-time Graduates *
If none, indicate "0".

0

15. Completion Rate
This is a calculated field based on #14 and #13.

16. 150% Graduates?

0

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
0

20. Graduates Employed in the Field *
If none, indicate "0".
0

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

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
0

22b. at least 30 hours per week *
If none, indicate "0".
0

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
0

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *
Yes

You have indicated "Yes" for question #26, please complete #26a below and the following screens with the required Exam Passage Rate - Year 1 and Exam Passage Rate – Year 2. (Two years of data is required.)

26a. Do graduates have the option or requirement for more than one type of licensing State exam? *
No

Exam Passage Rate - Year 1

2024 BPPE Annual Report - Program - Exam Passage Rate Data - 2023

Display Instructions for #27-34 (Toggle)
Not Checked

27. Name of the State licensing entity that licenses this field *
California Board of Registered Nursing

28. Name of State Exam *
NCLEX-RN

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

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

31. Number Who Failed the State Exam
This is a calculated field based on #25 and #26.
0

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

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

33a. Name of Agency *
California Board of Registered Nursing

Exam Passage Rate - Year 2

2024 BPPE Annual Report - Program - Exam Passage Rate Data - 2024

Display Instructions for #35-42 (Toggle)
Not Checked

35. Name of the State licensing entity that licenses this field *

California Board of Registered Nursing

36. Name of State Exam *

NCLEX-RN

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

0

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

0

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

0

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

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

Yes

41a. Name of Agency *

California Board of Registered Nursing

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

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

0

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

0

45. 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."**

$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 *

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 $100,000 *

0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Clinical Medical Assisting

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.0801 - Medical/Clinical Assistant.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

31-9092 - Medical Assistants

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *

If none, indicate "0".

209

9. Total Charges for this Program *

$19,340.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

76

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

89

12. Number of Students Who Began the Program *

If none, indicate "0".

306

13. Number of Students Available for Graduation *

If none, indicate "0".

301

14. Number of On-time Graduates *

If none, indicate "0".

91

15. Completion Rate

This is a calculated field based on #14 and #13.

30.23256

16. 150% Graduates?

209

17. 150% Completion Rate

This is a calculated field based on #16 and #13.

69.43522

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
180

20. Graduates Employed in the Field *
If none, indicate "0".
132

21. Placement Rate
This is a calculated field based on #17 and #18.
73.33333

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
35

22b. at least 30 hours per week *
If none, indicate "0".
97

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
132

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
6

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
Yes

24a. Select the Allied Health Professions requiring clinical training.
Medical Assistant

24b. Enter the name(s) of clinical site(s). Enter the License number or Employer Identification number, program name, total number of students and the number of students proficient in languages other than English.

Site Name	License or FIEN #	Program Name	Total Number of Students	Number of Students Proficient in Languages Other than English
Accelerated Urgent Care	N/A	Clinical Medical Assisting	9	0
Advanced Chiropractic Healthcare Center	N/A	Clinical Medical Assisting	2	0
Advanced Dermatology	N/A	Clinical Medical Assisting	6	0
Affordable Urgent Care	N/A	Clinical Medical Assisting	1	0
Allied Chiropractic	N/A	Clinical Medical Assisting	1	0
Antelope Valley Family Optometry	N/A	Clinical Medical Assisting	1	0
Atlas Health Clinic Palmdale	N/A	Clinical Medical Assisting	1	0
Atlas Urgent Care/Medical Consultants	N/A	Clinical Medical Assisting	1	0
AV Neuroscience	N/A	Clinical Medical Assisting	2	0
AV Occupational Medicine	N/A	Clinical Medical Assisting	1	0
AV Pulmonary Associates	N/A	Clinical Medical Assisting	1	0
AVORs Medical Group	N/A	Clinical Medical Assisting	1	0
AW Pathology Medical Group, Inc.	N/A	Clinical Medical Assisting	2	0
Bakersfield Pain Management Institute	N/A	Clinical Medical Assisting	1	0
Black Stone Medical Group	N/A	Clinical Medical Assisting	3	0
Brimhall Pediatrics	N/A	Clinical Medical Assisting	4	0
California Care Internal Medicine Group	N/A	Clinical Medical Assisting	1	0
California City Urgent Care	N/A	Clinical Medical Assisting	1	0
California Endocrine Center	N/A	Clinical Medical Assisting	1	0
Cardiology Specialist Medical Group - Hemet	N/A	Clinical Medical Assisting	1	0
Cardiology Specialist Medical Group - Temecula	N/A	Clinical Medical Assisting	1	0
Cardiology Specialist Medical Group-Murrieta	N/A	Clinical Medical Assisting	3	0
Central California Pain Management	N/A	Clinical Medical Assisting	1	0

Central Kern Nephrology Medical Group	N/A	Clinical Medical Assisting	1	0
Central Valley Medical Group	N/A	Clinical Medical Assisting	1	0
Central Valley Pain Management	N/A	Clinical Medical Assisting	1	0
Child Neurology Center of Bakersfield	N/A	Clinical Medical Assisting	1	0
Clinca Mi Pueblo	N/A	Clinical Medical Assisting	3	0
Clinica Sierra Vista - Bear Mtn	N/A	Clinical Medical Assisting	1	0
Coastal Allergy Care	N/A	Clinical Medical Assisting	1	0
Columbus Foot Care Associates	N/A	Clinical Medical Assisting	1	0
Comprehensive Care Clinic	N/A	Clinical Medical Assisting	1	0
DaVita Bakersfield Dialysis Center	N/A	Clinical Medical Assisting	1	0
Diabetic Foot and Wound	N/A	Clinical Medical Assisting	2	0
Digestive Disease Center	N/A	Clinical Medical Assisting	1	0
Dr Daniel Massari, DC Corp	N/A	Clinical Medical Assisting	3	0
Dr Onyinye Okezie	N/A	Clinical Medical Assisting	1	0
Dr. Aldo Gamarra	N/A	Clinical Medical Assisting	2	0
Dr. Dewey Pillai/Family Practice	N/A	Clinical Medical Assisting	2	0
Dr. Thuong Vo/Pain & Spine Institute	N/A	Clinical Medical Assisting	3	0
Dr. Vinay K Buttan, MD	N/A	Clinical Medical Assisting	1	0
Edralin Pediatric Center	N/A	Clinical Medical Assisting	1	0
Family Chiropractic	N/A	Clinical Medical Assisting	3	0
First Valley Medical Group - Cal City	N/A	Clinical Medical Assisting	5	0
FPA Women's Health	N/A	Clinical Medical Assisting	1	0
FPA Womens Health	N/A	Clinical Medical Assisting	1	0
GI Excellence	N/A	Clinical Medical Assisting	10	0
Grace Family Health, Inc	N/A	Clinical Medical Assisting	2	0
Heart Rhythm Clinic	N/A	Clinical Medical Assisting	5	0
Hematology and Oncology Specialist	N/A	Clinical Medical Assisting	1	0
Hope Cardiovascular Center	N/A	Clinical Medical Assisting	4	0
Hope Cardiovascular Center (Sun City)	N/A	Clinical Medical Assisting	2	0
Imperial Family Medical Group	N/A	Clinical Medical Assisting	1	0
Industrial Medical Group	N/A	Clinical Medical Assisting	1	0
Inspire Pulmonary and Sleep Medicine Specialists	N/A	Clinical Medical Assisting	3	0
Institute of Advanced Gastroenterology	N/A	Clinical Medical Assisting	6	0
Jeri Yvonne Movement Disorders Neurology	N/A	Clinical Medical Assisting	3	0
Kern Allergy	N/A	Clinical Medical Assisting	2	0
Kern County Hospital	N/A	Clinical Medical Assisting	1	0
Kern Gastroenterology Medical Group	N/A	Clinical Medical Assisting	3	0
Lancaster Health Solutions	N/A	Clinical Medical Assisting	1	0
Lancaster Urgent Care	N/A	Clinical Medical Assisting	7	0
LeVogue Med Spa	N/A	Clinical Medical Assisting	1	0
Living Waters Medical Clinic	N/A	Clinical Medical Assisting	1	0
Living Waters Medical Clinic/Murrieta	N/A	Clinical Medical Assisting	2	0
Medical Weight Control	N/A	Clinical Medical Assisting	1	0
New Life Medical	N/A	Clinical Medical Assisting	2	0
New Life Ultrasound	N/A	Clinical Medical Assisting	8	0
Niles Family Medicine	N/A	Clinical Medical Assisting	1	0
Pain Clinics of Central California	N/A	Clinical Medical Assisting	11	0
Palmdale Pediatric Center	N/A	Clinical Medical Assisting	1	0
Palmdale Women's Health Physician Group, Inc	N/A	Clinical Medical Assisting	8	0
Pediatrics for All	N/A	Clinical Medical Assisting	1	0
Premier Medical Associates	N/A	Clinical Medical Assisting	1	0
Premier Valley Medical Group	N/A	Clinical Medical Assisting	7	0
Premier Valley Medical Group - Stockdale	N/A	Clinical Medical Assisting	3	0
Proactive Work Health Medical Services - Palmdale	N/A	Clinical Medical Assisting	7	0

Proactive Work Health Medical Services-Lancaster	N/A	Clinical Medical Assisting	12	0
Quick Urgent Care	N/A	Clinical Medical Assisting	2	0
Rancho Family Medical Group - Single Oak	N/A	Clinical Medical Assisting	6	0
Rancho Family Medical Group -Hemet	N/A	Clinical Medical Assisting	1	0
Revive Medical	N/A	Clinical Medical Assisting	4	0
Roger Kasendorf DO	N/A	Clinical Medical Assisting	1	0
Sadeghi Occupational Chiropractic Corp.	N/A	Clinical Medical Assisting	2	0
San Joaquin Valley Pulmonary Medical Group	N/A	Clinical Medical Assisting	4	0
Skin and Cancer Institute - Palmdale	N/A	Clinical Medical Assisting	1	0
Skinsations Medical Aesthetics	N/A	Clinical Medical Assisting	1	0
Southland Arthritis	N/A	Clinical Medical Assisting	2	0
Southland Hematology Oncology Medical Group	N/A	Clinical Medical Assisting	1	0
Suarez & Toutoundjian Chiropractic	N/A	Clinical Medical Assisting	1	0
SummitMD Dermatology	N/A	Clinical Medical Assisting	1	0
Sunshine Medical Clinic	N/A	Clinical Medical Assisting	1	0
Synchrony Medical Group	N/A	Clinical Medical Assisting	1	0
Temecula Valley Endocrinology	N/A	Clinical Medical Assisting	1	0
Temecula Valley Family Physician's - Dr. Curtiss Combs	N/A	Clinical Medical Assisting	4	0
Temecula Valley Family Physician's - Dr. Curtiss Combs - Perris	N/A	Clinical Medical Assisting	4	0
Temecula Valley Family Physician's - Hemet	N/A	Clinical Medical Assisting	4	0
The Nephrology Group	N/A	Clinical Medical Assisting	2	0
The Practice	N/A	Clinical Medical Assisting	1	0
Treatment Center For Pain	N/A	Clinical Medical Assisting	2	0
Trinity Medical Multispecialty Group	N/A	Clinical Medical Assisting	2	0
Ultrasound Services Inc	N/A	Clinical Medical Assisting	3	0
United Medical Doctors EMT	N/A	Clinical Medical Assisting	1	0
United Medical Doctors Endo	N/A	Clinical Medical Assisting	1	0
United Medical Doctors ENT	N/A	Clinical Medical Assisting	2	0
United Medical Doctors Gastro	N/A	Clinical Medical Assisting	5	0
United Medical Doctors Ortho	N/A	Clinical Medical Assisting	1	0
Universal Urgent Care - Brimhall	N/A	Clinical Medical Assisting	6	0
Universal Urgent Care Ming Ave	N/A	Clinical Medical Assisting	2	0
Walgreens Pharmacy - Murrieta Hot Springs	N/A	Clinical Medical Assisting	3	0
West Coast Eye Institute	N/A	Clinical Medical Assisting	1	0
Young J Ko, M.D.	N/A	Clinical Medical Assisting	5	0
Yusufaly Imdad MD	N/A	Clinical Medical Assisting	2	0

25. For each clinical site, indicate whether any donation, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed.

Site Name	Donation or Compensation Amount	Type of Consideration

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

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

No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
180

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
132

45. 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."**

$0 - $5,000 *
0

$5,001 - $10,000 *
0

$10,001 - $15,000 *
1

$15,001 - $20,000 *
32

$20,001 - $25,000 *
2

$25,001 - $30,000 *
0

$30,001 - $35,000 *
31

$35,001 - $40,000 *
49

$40,001 - $45,000 *
13

$45,001 - $50,000 *
2

$50,001 - $55,000 *
2

$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 $100,000 *
0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Cardiac Sonography Associate of Applied Science

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Associate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.0901 - Cardiovascular Technology/Technologist.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

29-2032 - Diagnostic Medical Sonographers

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

0

9. Total Charges for this Program *

$0.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

0

13. Number of Students Available for Graduation *
If none, indicate "0".

0

14. Number of On-time Graduates *
If none, indicate "0".

0

15. Completion Rate
This is a calculated field based on #14 and #13.

16. 150% Graduates?

0

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
0

20. Graduates Employed in the Field *
If none, indicate "0".
0

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

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
0

22b. at least 30 hours per week *
If none, indicate "0".
0

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
0

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
Yes

24a. Select the Allied Health Professions requiring clinical training.
Cardiovascular Technologist

24b. Enter the name(s) of clinical site(s). Enter the License number or Employer Identification number, program name, total number of students and the number of students proficient in languages other than English.

Site Name	License or FIEN #	Program Name	Total Number of Students	Number of Students Proficient in Languages Other than English

25. For each clinical site, indicate whether any donation, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed.

Site Name	Donation or Compensation Amount	Type of Consideration

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *
No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
0

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
0

45. 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."**

$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 *

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 $100,000 *

0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Dental Assisting

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

Dental Assisting/Assistant.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

31-9091 - Dental Assistants

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

61

9. Total Charges for this Program *

$19,340.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

63

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

75

12. Number of Students Who Began the Program *
If none, indicate "0".

91

13. Number of Students Available for Graduation *
If none, indicate "0".

88

14. Number of On-time Graduates *
If none, indicate "0".

10

15. Completion Rate
This is a calculated field based on #14 and #13.

11.36364

16. 150% Graduates?

61

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

69.31818

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
54

20. Graduates Employed in the Field *
If none, indicate "0".
43

21. Placement Rate
This is a calculated field based on #17 and #18.
79.62963

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
17

22b. at least 30 hours per week *
If none, indicate "0".
26

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
43

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
1

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *
No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
54

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
43

45. 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."**

$0 - $5,000 *
0

$5,001 - $10,000 *
0

$10,001 - $15,000 *
0

$15,001 - $20,000 *
14

$20,001 - $25,000 *
3

$25,001 - $30,000 *
0

$30,001 - $35,000 *
8

$35,001 - $40,000 *
18

$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 $100,000 *
0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Emergency Medical Technician

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

Emergency Medical Technology/Technician (EMT Paramedic).

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

29-2042 - Emergency Medical Technicians

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

0

9. Total Charges for this Program *

$0.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

0

13. Number of Students Available for Graduation *
If none, indicate "0".

0

14. Number of On-time Graduates *
If none, indicate "0".

0

15. Completion Rate
This is a calculated field based on #14 and #13.

16. 150% Graduates?

0

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
0

20. Graduates Employed in the Field *
If none, indicate "0".
0

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

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
0

22b. at least 30 hours per week *
If none, indicate "0".
0

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
0

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *
No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
0

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
0

45. 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."**

$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 *
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 $100,000 *
0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Medical Billing and Coding

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.0714 - Medical Insurance Specialist/Medical Biller.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

43-6013 - Medical Secretaries and Administrative Assistants

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

48

9. Total Charges for this Program *

$19,340.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

68

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

79

12. Number of Students Who Began the Program *
If none, indicate "0".

73

13. Number of Students Available for Graduation *
If none, indicate "0".

70

14. Number of On-time Graduates *
If none, indicate "0".

16

15. Completion Rate
This is a calculated field based on #14 and #13.

22.85714

16. 150% Graduates?

48

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

68.57143

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
43

20. Graduates Employed in the Field *
If none, indicate "0".
31

21. Placement Rate
This is a calculated field based on #17 and #18.
72.09302

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
7

22b. at least 30 hours per week *
If none, indicate "0".
24

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
31

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *
No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
43

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
31

45. 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."**

$0 - $5,000 *
0

$5,001 - $10,000 *
0

$10,001 - $15,000 *
0

$15,001 - $20,000 *
6

$20,001 - $25,000 *
1

$25,001 - $30,000 *
0

$30,001 - $35,000 *
8

$35,001 - $40,000 *
12

$40,001 - $45,000 *
3

$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 $100,000 *
0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Magnetic Resonance Imaging Associate of Applied Science

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Associate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.0920 - Magnetic Resonance Inmaging (MRI) Technology/Technician

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

29-2035 - Magnetic Resonance Imaging Technologists

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

0

9. Total Charges for this Program *

$0.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

0

13. Number of Students Available for Graduation *
If none, indicate "0".

0

14. Number of On-time Graduates *
If none, indicate "0".

0

15. Completion Rate
This is a calculated field based on #14 and #13.

16. 150% Graduates?

0

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
0

20. Graduates Employed in the Field *
If none, indicate "0".
0

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

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
0

22b. at least 30 hours per week *
If none, indicate "0".
0

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
0

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *
No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
0

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
0

45. 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."**

$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 *
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 $100,000 *
0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Nursing Assistant

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Other

5a. If "Other" was indicated in #5, please specify *

Non-Degree Seeking

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.1614 - Nurse/Nursing Assistant/Aide and Patient Care Assistant.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

31-1131 - Nursing Assistants

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

0

9. Total Charges for this Program *

$0.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

0

13. Number of Students Available for Graduation *
If none, indicate "0".

0

14. Number of On-time Graduates *
If none, indicate "0".

0

15. Completion Rate
This is a calculated field based on #14 and #13.

16. 150% Graduates?

0

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
0

20. Graduates Employed in the Field *
If none, indicate "0".
0

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

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
0

22b. at least 30 hours per week *
If none, indicate "0".
0

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
0

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *

No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

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

No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
0

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
0

45. 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."**

$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 *
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 $100,000 *

0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Pharmacy Technician

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.0805 - Pharmacy Technician/Assistant.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

29-2052 - Pharmacy Technicians

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

65

9. Total Charges for this Program *

$19,535.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

74

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

82

12. Number of Students Who Began the Program *
If none, indicate "0".

79

13. Number of Students Available for Graduation *
If none, indicate "0".

78

14. Number of On-time Graduates *
If none, indicate "0".

25

15. Completion Rate
This is a calculated field based on #14 and #13.

32.05128

16. 150% Graduates?

65

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

83.33333

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
56

20. Graduates Employed in the Field *
If none, indicate "0".
42

21. Placement Rate
This is a calculated field based on #17 and #18.
75

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
21

22b. at least 30 hours per week *
If none, indicate "0".
21

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
42

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
4

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
Yes

24a. Select the Allied Health Professions requiring clinical training.
Pharmacy Technician and Technologist

24b. Enter the name(s) of clinical site(s). Enter the License number or Employer Identification number, program name, total number of students and the number of students proficient in languages other than English.

Site Name	License or FIEN #	Program Name	Total Number of Students	Number of Students Proficient in Languages Other than English
Right Care Pharmacy	N/A	Pharmacy Technician	1	0
Ingram's Pharmacy	N/A	Pharmacy Technician	1	0
VDCrx	N/A	Pharmacy Technician	1	0
VCA California Oaks Animal Hospital	N/A	Pharmacy Technician	4	0
Inovia Pharmacy	N/A	Pharmacy Technician	1	0
Medical Plaza Pharmacy	N/A	Pharmacy Technician	1	0
Wible Pharmacy	N/A	Pharmacy Technician	3	0
19th Street Dental	N/A	Pharmacy Technician	1	0
Care Pharm	N/A	Pharmacy Technician	1	0
Carepoint Pharmacy	N/A	Pharmacy Technician	2	0
RPH Express Pharmacy	N/A	Pharmacy Technician	9	0
Clinica Pharmacy	N/A	Pharmacy Technician	1	0
RPH Express Pharmacy Stockdale	N/A	Pharmacy Technician	1	0
Temecula 24 Hour Urgent Care	N/A	Pharmacy Technician	1	0
Southwest Pharmacy	N/A	Pharmacy Technician	2	0
Hemet Care Pharmacy	N/A	Pharmacy Technician	1	0
Acton Vale Pharmacy	N/A	Pharmacy Technician	1	0
Walgreen's Pharmacy (L&30th)	N/A	Pharmacy Technician	1	0
Walgreen's Pharmacy - E Lanc	N/A	Pharmacy Technician	2	0
Hemet Valley Medical Center	N/A	Pharmacy Technician	1	0
Lindsay Pharmacy	N/A	Pharmacy Technician	3	0
Walgreens	N/A	Pharmacy Technician	4	0
Quartz Hill Pharmacy	N/A	Pharmacy Technician	1	0
Advance Care Pharmacy	N/A	Pharmacy Technician	2	0
Dimas Pharmacy	N/A	Pharmacy Technician	2	0
Advanced Care Pharmacy	N/A	Pharmacy Technician	1	0

Walgreens - Murrieta Hot Springs Rd	N/A	Pharmacy Technician	2	0
Walgreens - S. Sanderson Ave.	N/A	Pharmacy Technician	1	0
Curex Pharmacy	N/A	Pharmacy Technician	1	0
Walgreens Pharmacy	N/A	Pharmacy Technician	6	0
Bakersfield Pharmacy	N/A	Pharmacy Technician	1	0
CVS - Bakersfield	N/A	Pharmacy Technician	2	0
CVS - Target Plmdl	N/A	Pharmacy Technician	1	0
Super Care Pharmacy	N/A	Pharmacy Technician	1	0
Walgreens Pharmacy - Santa Clarita	N/A	Pharmacy Technician	1	0
Walgreens Sun City	N/A	Pharmacy Technician	2	0
CVS - Target Plmdl West	N/A	Pharmacy Technician	1	0
Peoples Pharmacy	N/A	Pharmacy Technician	1	0
Total Care Pharmacy	N/A	Pharmacy Technician	1	0
CVS - West Ave L & 40th St W	N/A	Pharmacy Technician	1	0
El Tejon Pharmacy	N/A	Pharmacy Technician	1	0
Hospicare Pharmacy Inland Empire	N/A	Pharmacy Technician	4	0
Vail Ranch Pharmacy	N/A	Pharmacy Technician	1	0
Walmart Pharmacy Corona	N/A	Pharmacy Technician	2	0
CVS Health	N/A	Pharmacy Technician	1	0
CVS Mall View Rd	N/A	Pharmacy Technician	1	0
Regional Essential Pharmacy & Medical Supplies	N/A	Pharmacy Technician	1	0
Great RX Pharmacy	N/A	Pharmacy Technician	2	0
Auburn Pharmacy & Compounding Center	N/A	Pharmacy Technician	2	0
Pacific Dental Care - Palmdale	N/A	Pharmacy Technician	3	0
CVS Pharmacy	N/A	Pharmacy Technician	1	0
Day Street Pharmacy	N/A	Pharmacy Technician	1	0

25. For each clinical site, indicate whether any donation, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed.

Site Name	Donation or Compensation Amount	Type of Consideration

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

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

No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

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

56

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

42

45. 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."**

$0 - $5,000 *

0

$5,001 - $10,000 *

0

$10,001 - $15,000 *

0

$15,001 - $20,000 *

18

$20,001 - $25,000 *

2

$25,001 - $30,000 *

1

$30,001 - $35,000 *

4

$35,001 - $40,000 *

13

$40,001 - $45,000 *

3

$45,001 - $50,000 *

0

$50,001 - $55,000 *

1

$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 $100,000 *

0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *
2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.
25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.
High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *
Ultrasound Technician

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *
Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)
51.0910 - Diagnostic Medical Sonography/Sonographer and Ultrasound Technician.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)
29-2032 - Diagnostic Medical Sonographers

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".
19

9. Total Charges for this Program *
$51,699.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *
80

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *
79

12. Number of Students Who Began the Program *
If none, indicate "0".
23

13. Number of Students Available for Graduation *
If none, indicate "0".
23

14. Number of On-time Graduates *
If none, indicate "0".
14

15. Completion Rate
This is a calculated field based on #14 and #13.
60.86957

16. 150% Graduates?
19

17. 150% Completion Rate
This is a calculated field based on #16 and #13.
82.6087

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? *
No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
17

20. Graduates Employed in the Field *
If none, indicate "0".
15

21. Placement Rate
This is a calculated field based on #17 and #18.
88.23529

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
5

22b. at least 30 hours per week *
If none, indicate "0".
10

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
15

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
2

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
Yes

24a. Select the Allied Health Professions requiring clinical training.
Diagnostic Medical Sonographer

24b. Enter the name(s) of clinical site(s). Enter the License number or Employer Identification number, program name, total number of students and the number of students proficient in languages other than English.

Site Name	License or FIEN #	Program Name	Total Number of Students	Number of Students Proficient in Languages Other than English
All Around Ultrasound	N/A	Ultrasound Technician	9	0
Kern County Medical Hospital	N/A	Ultrasound Technician	4	0
Secret Stork	N/A	Ultrasound Technician	9	0
Sierra View Medical Center	N/A	Ultrasound Technician	4	0
Tri County Medical Imaging	N/A	Ultrasound Technician	4	0
Unique Ultrasound	N/A	Ultrasound Technician	1	0
Women's Health Association of Southern Nevada	N/A	Ultrasound Technician	1	0

25. For each clinical site, indicate whether any donation, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed.

Site Name	Donation or Compensation Amount	Type of Consideration

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *
No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

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

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
15

45. 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."**

$0 - $5,000 *
0

$5,001 - $10,000 *
0

$10,001 - $15,000 *
0

$15,001 - $20,000 *
2

$20,001 - $25,000 *
2

$25,001 - $30,000 *
0

$30,001 - $35,000 *
0

$35,001 - $40,000 *
0

$40,001 - $45,000 *
6

$45,001 - $50,000 *
2

$50,001 - $55,000 *
2

$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 *
1

$90,001 - $95,000 *
0

$95,001 - $100,000 *
0

Over $100,000 *
0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)

Not Checked

4. Name of Program *

Ultrasound Technician Associate of Applied Science

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Associate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.0910 - Diagnostic Medical Sonography/Sonographer and Ultrasound Technician.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

29-2032 - Diagnostic Medical Sonographers

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *

If none, indicate "0".

141

9. Total Charges for this Program *

$59,120.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

81

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

79

12. Number of Students Who Began the Program *

If none, indicate "0".

216

13. Number of Students Available for Graduation *

If none, indicate "0".

203

14. Number of On-time Graduates *

If none, indicate "0".

73

15. Completion Rate

This is a calculated field based on #14 and #13.

35.96059

16. 150% Graduates?

141

17. 150% Completion Rate

This is a calculated field based on #16 and #13.

69.45813

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
125

20. Graduates Employed in the Field *
If none, indicate "0".
89

21. Placement Rate
This is a calculated field based on #17 and #18.
71.2

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
35

22b. at least 30 hours per week *
If none, indicate "0".
54

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
89

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
14

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
Yes

24a. Select the Allied Health Professions requiring clinical training.
Diagnostic Medical Sonographer

24b. Enter the name(s) of clinical site(s). Enter the License number or Employer Identification number, program name, total number of students and the number of students proficient in languages other than English.

Site Name	License or FIEN #	Program Name	Total Number of Students	Number of Students Proficient in Languages Other than English
Advanced Imaging Center- Lancaster (AIC)	N/A	Ultrasound Technician Associate of Applied Science	1	0
Advanced Mobile Ultrasound	N/A	Ultrasound Technician Associate of Applied Science	3	0
Advanced Women's Health	N/A	Ultrasound Technician Associate of Applied Science	9	0
Adventist Health Sierra Vista	N/A	Ultrasound Technician Associate of Applied Science	1	0
Antelope Valley Advanced Imaging - Palmdale	N/A	Ultrasound Technician Associate of Applied Science	1	0
Antelope Valley Medical Center	N/A	Ultrasound Technician Associate of Applied Science	7	0
Array Medical Imaging	N/A	Ultrasound Technician Associate of Applied Science	16	0
Aspen Health Screening	N/A	Ultrasound Technician Associate of Applied Science	5	0
Baby Bound Ultrasound	N/A	Ultrasound Technician Associate of Applied Science	1	0
Baby Glimpses	N/A	Ultrasound Technician Associate of Applied Science	2	0
Babyland Cinema	N/A	Ultrasound Technician Associate of Applied Science	3	0
Baby's First	N/A	Ultrasound Technician Associate of Applied Science	9	0
Babyview 3D4D Imaging	N/A	Ultrasound Technician Associate of Applied Science	3	0
Blessings 3D/4D Ultrasound	N/A	Ultrasound Technician Associate of Applied Science	2	0
Central Valley Medical & Women's Imaging	N/A	Ultrasound Technician Associate of Applied Science	1	0
Clinica La Victoria Union	N/A	Ultrasound Technician Associate of Applied Science	13	0
Cypress Diagnostic Imaging	N/A	Ultrasound Technician Associate of Applied Science	22	0
Diagnostic Solutions	N/A	Ultrasound Technician Associate of Applied Science	25	0
Dr. Hans Yu	N/A	Ultrasound Technician Associate of Applied Science	2	0

Dr. Kumar (Vascular Health)	N/A	Ultrasound Technician Associate of Applied Science	3	0
Dr. Sharma	N/A	Ultrasound Technician Associate of Applied Science	1	0
Dr. Tiwana	N/A	Ultrasound Technician Associate of Applied Science	10	0
Dr. Tony Hoang	N/A	Ultrasound Technician Associate of Applied Science	2	0
Echo Vision, Inc.	N/A	Ultrasound Technician Associate of Applied Science	1	0
Elite Advanced Imaging/Radnet	N/A	Ultrasound Technician Associate of Applied Science	3	0
Excel Imaging / Heavenly 3D 4D	N/A	Ultrasound Technician Associate of Applied Science	18	0
Heart and Vascular Wellness Center	N/A	Ultrasound Technician Associate of Applied Science	1	0
Heavenly 3D 4D / Excel both Diagnostic and 3-D-4D	N/A	Ultrasound Technician Associate of Applied Science	1	0
Heavenly 3D/4D - Excel Imaging Centers	N/A	Ultrasound Technician Associate of Applied Science	14	0
Herb S Brar MD	N/A	Ultrasound Technician Associate of Applied Science	3	0
Imperial Radiology (IR)	N/A	Ultrasound Technician Associate of Applied Science	1	0
Insight Ultrasound, LLC	N/A	Ultrasound Technician Associate of Applied Science	2	0
Iowa Clinics	N/A	Ultrasound Technician Associate of Applied Science	1	0
Kaweah Delta Medical Center	N/A	Ultrasound Technician Associate of Applied Science	4	0
Kern Radiology	N/A	Ultrasound Technician Associate of Applied Science	1	0
Kern Vascular Center	N/A	Ultrasound Technician Associate of Applied Science	33	0
La Jolla Vein & Vascular	N/A	Ultrasound Technician Associate of Applied Science	1	0
Lancaster Imaging/Radnet	N/A	Ultrasound Technician Associate of Applied Science	5	0
Legacy Ultrasound Imaging	N/A	Ultrasound Technician Associate of Applied Science	1	0
Lynwood Imaging Center (Corporate)	N/A	Ultrasound Technician Associate of Applied Science	15	0
Main Street Imaging	N/A	Ultrasound Technician Associate of Applied Science	1	0
McKay-Dee Hospital	N/A	Ultrasound Technician Associate of Applied Science	1	0
Memorial MRI & Diagnostics	N/A	Ultrasound Technician Associate of Applied Science	1	0
Montclair Chino (Corporate Headquaters)	N/A	Ultrasound Technician Associate of Applied Science	1	0
My Ultrasound Health	N/A	Ultrasound Technician Associate of Applied Science	34	0
My Ultrasound Health Center	N/A	Ultrasound Technician Associate of Applied Science	39	0
My Ultrasound Health Center Inc	N/A	Ultrasound Technician Associate of Applied Science	24	0
Naval Medical Center Camp Lejeune	N/A	Ultrasound Technician Associate of Applied Science	1	0
New Life Ultrasound - Riverside	N/A	Ultrasound Technician Associate of Applied Science	1	0
New Life Ultrasound 3D/4D	N/A	Ultrasound Technician Associate of Applied Science	1	0
Next Generation Prenatal Imaging	N/A	Ultrasound Technician Associate of Applied Science	4	0
Online Sonosim	N/A	Ultrasound Technician Associate of Applied Science	559	0
Orange Diagnostic Ultrasound / Fetal Memories 3D 4D	N/A	Ultrasound Technician Associate of Applied Science	2	0
Palmdale Regional Medical Center	N/A	Ultrasound Technician Associate of Applied Science	1	0
Providence St. Mary Medical Center	N/A	Ultrasound Technician Associate of Applied Science	1	0
Quality Diagnostic Sonography Services	N/A	Ultrasound Technician Associate of Applied Science	1	0
Radnet - Temecula Valley Advanced Imaging	N/A	Ultrasound Technician Associate of Applied Science	2	0
RadNet Corporate: for all RadNet sites in California Santa Clarita Imaging - Santa Clarita	N/A	Ultrasound Technician Associate of Applied Science	2	0
RadNet Inland Empire | Healthcare Imaging Center at Day Street	N/A	Ultrasound Technician Associate of Applied Science	1	0
Radnet Temecula Valley Imaging Murrieta	N/A	Ultrasound Technician Associate of Applied Science	3	0
Radnet-Temecula Valley Advanced Imaging Highway 79	N/A	Ultrasound Technician Associate of Applied Science	1	0

San Diego Vascular Center / Palomar Health Medical Group	N/A	Ultrasound Technician Associate of Applied Science	1	0
San Jacinto Advanced Imaging	N/A	Ultrasound Technician Associate of Applied Science	3	0
Sono Baby Ultrasound	N/A	Ultrasound Technician Associate of Applied Science	5	0
Sonotec Advanced Imaging	N/A	Ultrasound Technician Associate of Applied Science	29	0
Sonotec Imaging	N/A	Ultrasound Technician Associate of Applied Science	6	0
Stockdale Radiology - Bakersfield	N/A	Ultrasound Technician Associate of Applied Science	4	0
Sunder Heart Institute	N/A	Ultrasound Technician Associate of Applied Science	4	0
Temecula Valley Advanced Imaging - RadNet	N/A	Ultrasound Technician Associate of Applied Science	6	0
Temecula Valley Hospital	N/A	Ultrasound Technician Associate of Applied Science	3	0
Temecula Valley Imaging- Cal Oaks- RadNet	N/A	Ultrasound Technician Associate of Applied Science	1	0
Trinity Diagnostics Imaging	N/A	Ultrasound Technician Associate of Applied Science	1	0
Trinity Ultrasound	N/A	Ultrasound Technician Associate of Applied Science	22	0
True Ultrasound	N/A	Ultrasound Technician Associate of Applied Science	1	0
Ultra Imaging	N/A	Ultrasound Technician Associate of Applied Science	14	0
Unique Ultrasound - Non Diagnostic	N/A	Ultrasound Technician Associate of Applied Science	2	0
Unique Ultrasound - Rancho Mirage	N/A	Ultrasound Technician Associate of Applied Science	2	0
United Medical Doctors	N/A	Ultrasound Technician Associate of Applied Science	1	0
Urgent Pointe Medical Group PC DBA UP Medical	N/A	Ultrasound Technician Associate of Applied Science	2	0
Wave Imaging San Clemente Radnet	N/A	Ultrasound Technician Associate of Applied Science	1	0
Western Diagnostic Imaging	N/A	Ultrasound Technician Associate of Applied Science	2	0

25. For each clinical site, indicate whether any donation, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed.

Site Name	Donation or Compensation Amount	Type of Consideration

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

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

No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

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

125

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

89

45. 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."**

$0 - $5,000 *

0

$5,001 - $10,000 *

0

$10,001 - $15,000 *

0

$15,001 - $20,000 *

23

$20,001 - $25,000 *

5

$25,001 - $30,000 *

3

$30,001 - $35,000 *

7

$35,001 - $40,000 *

1

$40,001 - $45,000 *

40

$45,001 - $50,000 *

0

$50,001 - $55,000 *

3

$55,001 - $60,000 *

0

$60,001 - $65,000 *

3

$65,001 - $70,000 *

0

$70,001 - $75,000 *

1

$75,001 - $80,000 *

1

$80,001 - $85,000 *

1

$85,001 - $90,000 *

1

$90,001 - $95,000 *

0

$95,001 - $100,000 *

0

Over $100,000 *

0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Veterinary Assistant

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.0808 - Veterinary/Animal Health Technology/Technician and Veterinary Assistant.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

31-9096 - Veterinary Assistants and Laboratory Animal Caretakers

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

99

9. Total Charges for this Program *

$19,340.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

69

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

92

12. Number of Students Who Began the Program *
If none, indicate "0".

142

13. Number of Students Available for Graduation *
If none, indicate "0".

138

14. Number of On-time Graduates *
If none, indicate "0".

17

15. Completion Rate
This is a calculated field based on #14 and #13.

12.31884

16. 150% Graduates?

99

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

71.73913

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
82

20. Graduates Employed in the Field *
If none, indicate "0".
62

21. Placement Rate
This is a calculated field based on #17 and #18.
75.60976

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
28

22b. at least 30 hours per week *
If none, indicate "0".
34

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
62

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
6

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *
No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
82

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
62

45. 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."**

$0 - $5,000 *
0

$5,001 - $10,000 *
0

$10,001 - $15,000 *
0

$15,001 - $20,000 *
23

$20,001 - $25,000 *
4

$25,001 - $30,000 *
1

$30,001 - $35,000 *
9

$35,001 - $40,000 *
16

$40,001 - $45,000 *
8

$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 $100,000 *
0

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Vocational Nursing

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.1613 - Licensed Practical/Vocational Nurse Training (LPN, LVN, Cert., Dipl, AAS).

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

29-2061 - Licensed Practical and Licensed Vocational Nurses

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

67

9. Total Charges for this Program *

$35,311.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

81

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

84

12. Number of Students Who Began the Program *
If none, indicate "0".

112

13. Number of Students Available for Graduation *
If none, indicate "0".

106

14. Number of On-time Graduates *
If none, indicate "0".

36

15. Completion Rate
This is a calculated field based on #14 and #13.

33.96226

16. 150% Graduates?

67

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

63.20755

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
60

20. Graduates Employed in the Field *
If none, indicate "0".
46

21. Placement Rate
This is a calculated field based on #17 and #18.
76.66667

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
2

22b. at least 30 hours per week *
If none, indicate "0".
44

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
46

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
Yes

24a. Select the Allied Health Professions requiring clinical training.
Licensed Vocational Nurse

24b. Enter the name(s) of clinical site(s). Enter the License number or Employer Identification number, program name, total number of students and the number of students proficient in languages other than English.

Site Name	License or FIEN #	Program Name	Total Number of Students	Number of Students Proficient in Languages Other than English
Mirage Post Acute	N/A	Vocational Nursing	73	0
Antelope Valley Care Center	N/A	Vocational Nursing	48	0
The Desert Canyon Post Acute	N/A	Vocational Nursing	54	0
The Ellison John Transitional Care Center	N/A	Vocational Nursing	36	0
Antelope Valley Medical Center	N/A	Vocational Nursing	68	0
Totally Kids Specialty Healthcare	N/A	Vocational Nursing	68	0
Palmdale Pediatrics	N/A	Vocational Nursing	5	0
Caring Corner	N/A	Vocational Nursing	34	0
Laugh and Learn	N/A	Vocational Nursing	8	0
Height St. Skilled Care	N/A	Vocational Nursing	34	0
Windsor Bakersfield Post Acute	N/A	Vocational Nursing	26	0
Rehabilitation Center of Bakersfield	N/A	Vocational Nursing	38	0
The Orchard Post Acute	N/A	Vocational Nursing	24	0
Arvin Post Acute	N/A	Vocational Nursing	22	0
Good Samaritan Hospital	N/A	Vocational Nursing	42	0
Sierra View Medical Center	N/A	Vocational Nursing	32	0
Cal Ivy	N/A	Vocational Nursing	15	0
Temecula Healthcare	N/A	Vocational Nursing	34	0
Temecula Valley Hospital	N/A	Vocational Nursing	10	0
Eisenhower Hospital	N/A	Vocational Nursing	23	0
Esienhower Healthcare Rancho Mirage Clinic	N/A	Vocational Nursing	4	0
Eisenhower Healthcare Argyros Health Center	N/A	Vocational Nursing	4	0
Neighborhood Healthcare, Temecula	N/A	Vocational Nursing	2	0

Neighborhood healthcare, Riverside	N/A	Vocational Nursing	1	0
Neighborhood Healthcare, El Cajon	N/A	Vocational Nursing	1	0
Neighborhood Healthcare, Escondido Date St.	N/A	Vocational Nursing	1	0
Neighborhood Healthcare, Escondido Elm St.	N/A	Vocational Nursing	1	0
Totally Kids Specialty Healthcare Sun Valley	N/A	Vocational Nursing	9	0
Together We Grow	N/A	Vocational Nursing	6	0
The Village, Hemet	N/A	Vocational Nursing	10	0
The Springs, Murietta	N/A	Vocational Nursing	10	0

25. For each clinical site, indicate whether any donation, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed.

Site Name	Donation or Compensation Amount	Type of Consideration

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

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

Yes

You have indicated "Yes" for question #26, please complete #26a below and the following screens with the required Exam Passage Rate - Year 1 and Exam Passage Rate – Year 2. (Two years of data is required.)

26a. Do graduates have the option or requirement for more than one type of licensing State exam? *

No

Exam Passage Rate - Year 1

2024 BPPE Annual Report - Program - Exam Passage Rate Data - 2023

Display Instructions for #27-34 (Toggle)
Not Checked

27. Name of the State licensing entity that licenses this field *

BVNPT

28. Name of State Exam *

NCLEX-VN

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

58

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

46

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

12

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

79.31034

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

Yes

33a. Name of Agency *

BVNPT

Exam Passage Rate - Year 2

2024 BPPE Annual Report - Program - Exam Passage Rate Data - 2024

Display Instructions for #35-42 (Toggle)
Not Checked

35. Name of the State licensing entity that licenses this field *

BVNPT

36. Name of State Exam *

NCLEX-VN

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

70

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

56

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

14

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

80

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

Yes

41a. Name of Agency *

BVNPT

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
60

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
46

45. 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."**

$0 - $5,000 *
0

$5,001 - $10,000 *
0

$10,001 - $15,000 *
0

$15,001 - $20,000 *
1

$20,001 - $25,000 *
0

$25,001 - $30,000 *
0

$30,001 - $35,000 *
1

$35,001 - $40,000 *
0

$40,001 - $45,000 *
0

$45,001 - $50,000 *
0

$50,001 - $55,000 *
3

$55,001 - $60,000 *
4

$60,001 - $65,000 *
12

$65,001 - $70,000 *
14

$70,001 - $75,000 *
4

$75,001 - $80,000 *
3

$80,001 - $85,000 *
1

$85,001 - $90,000 *
2

$90,001 - $95,000 *
0

$95,001 - $100,000 *
0

Over $100,000 *
1

Institution Information

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

25860907

3. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

High Desert Medical College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)

Not Checked

4. Name of Program *

Vocational Nursing Associate of Applied Science

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Associate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.1613 - Licensed Practical/Vocational Nurse Training (LPN, LVN, Cert., Dipl, AAS).

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

29-2061 - Licensed Practical and Licensed Vocational Nurses

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)

Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *

If none, indicate "0".

14

9. Total Charges for this Program *

$19,735.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

96

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

93

12. Number of Students Who Began the Program *

If none, indicate "0".

20

13. Number of Students Available for Graduation *

If none, indicate "0".

20

14. Number of On-time Graduates *

If none, indicate "0".

12

15. Completion Rate

This is a calculated field based on #14 and #13.

60

16. 150% Graduates?

14

17. 150% Completion Rate

This is a calculated field based on #16 and #13.

70

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".
14

20. Graduates Employed in the Field *
If none, indicate "0".
11

21. Placement Rate
This is a calculated field based on #17 and #18.
78.57143

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".
0

22b. at least 30 hours per week *
If none, indicate "0".
11

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".
11

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".
0

23c. Freelance/self-employed *
If none, indicate "0".
0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".
0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *
No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *
No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked

43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.
14

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.
11

45. 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."**

$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 *
0

$40,001 - $45,000 *
0

$45,001 - $50,000 *
0

$50,001 - $55,000 *
0

$55,001 - $60,000 *
2

$60,001 - $65,000 *
3

$65,001 - $70,000 *
1

$70,001 - $75,000 *
3

$75,001 - $80,000 *
1

$80,001 - $85,000 *
0

$85,001 - $90,000 *
0

$90,001 - $95,000 *
0

$95,001 - $100,000 *
0

Over $100,000 *
1