#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

1. Report Year 2023 2. Institution Code 2700541

3. Institution Name (auto-

populated)

Central Coast College

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

8. Number of Degrees,

**Diplomas or Certificates** 

**Awarded** 

0

9. Total Charges for this

**Program** 

\$0.00

10. The percentage of enrolled students in the reporting year receiving 0 federal student loans to pay for this program

11. The percentage of graduates in the reporting

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	0
13. Number of Students  Available for Graduation	0
14. Number of On-time Graduates	0
16. 150% Graduates?	0
18. Is the above data taken from the Integrated	
Postsecondary Education Data System (IPEDS) of the United States	No
Department of Education?  19. Graduates Available	
for Employment	0
20. Graduates Employed in the Field	0
22a. 20 to 29 hours per week	0
22b. at least 30 hours per week	0
23a. In a single position in the field of study	0
23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)	0
23c. Freelance/self- employed	0
23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution	0
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
26. Does this educational	No

program lead to an	
occupation that requires	
State licensing?	
43. Graduates Available	0
for Employment	U
44. Graduates Employed	0
in the Field	U
\$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

Analyst unassigned@simpligov.com

# Completed Stages:

Institution Info: ✓ 11/29/2024 05:00:27 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

# Comments

Comments(0)

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#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

1. Report Year 2023 2. Institution Code 2700541

3. Institution Name (auto-

populated)

Central Coast College

4. Name of Program **Business Administrative Specialist** 

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.

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.

list the code that most accurately corresponds to the educational program.

(Optional)

7. Select all Standard

Occupational

Classification (SOC) Codes

that apply to this program. Select all applicable codes from the dropdown list. (Optional)

8. Number of Degrees, Diplomas or Certificates

**Awarded** 

9. Total Charges for this

**Program** 

\$14,625.00

0

0

10. The percentage of enrolled students in the 0 reporting year receiving federal student loans to

pay for this program

11. The percentage of graduates in the reporting Diploma/Certificate

**Select from the dropdown** 52.0401 - Administrative Assistant and Secretarial Science, General

43-6011 - Executive Secretaries and Executive Administrative Assistants

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	0
13. Number of Students  Available for Graduation	0
14. Number of On-time Graduates	0
16. 150% Graduates?	0
18. Is the above data taken from the Integrated	
Postsecondary Education Data System (IPEDS) of the United States	No
Department of Education?  19. Graduates Available	
for Employment	0
20. Graduates Employed in the Field	0
22a. 20 to 29 hours per week	0
22b. at least 30 hours per week	0
23a. In a single position in the field of study	0
23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)	0
23c. Freelance/self- employed	0
23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution	0
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
26. Does this educational	No

program lead to an	
occupation that requires	
State licensing?	
43. Graduates Available	0
for Employment	Ü
44. Graduates Employed	0
in the Field	O
\$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

Analyst unassigned@simpligov.com

# Completed Stages:

Institution Info: ✓ 11/29/2024 05:02:52 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

# Comments

Comments(0)

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#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

**1. Report Year** 2023 **2. Institution Code** 2700541

3. Institution Name (auto-

populated)

Central Coast College

**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.

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

8. Number of Degrees,

**Diplomas or Certificates** 

**Awarded** 

20

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

11. The percentage of graduates in the reporting

66

year who took out federal	
student loans to pay for	
this program	
12. Number of Students	20
Who Began the Program	20
13. Number of Students	•
Available for Graduation	20
14. Number of On-time	
Graduates	7
15. Completion Rate	35
16. 150% Graduates?	13
17. 150% Completion Rate	65
•	03
18. Is the above data	
taken from the Integrated	
Postsecondary Education	No
Data System (IPEDS) of	
the United States	
Department of Education?	
19. Graduates Available	20
for Employment	_0
20. Graduates Employed	20
in the Field	20
21. Placement Rate	100
22a. 20 to 29 hours per	2
week	3
22b. at least 30 hours per	
week	17
23a. In a single position in	
the field of study	20
23b. In concurrent	
aggregated positions in	
the field of study (2 or	0
more positions at the	
same time)	
23c. Freelance/self-	
employed	0
23d. By the institution or	
an employer owned by	
the institution, or an	
employer who shares	0
ownership with the	
institution	
24. Does this "Program" lead to a certificate or	
degree related to one or	No
more of the following	110
allied health professionals	
amed health professionals	

that requires clinical	
training?	
26. Does this educational	
program lead to an	No
occupation that requires	140
State licensing?	
43. Graduates Available	20
for Employment	20
44. Graduates Employed	20
in the Field	20
\$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	5
\$35,001 - \$40,000	7
\$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

Analyst unassigned@simpligov.com

# Completed Stages:

Institution Info: ✓ 11/29/2024 05:00:08 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

Comments

# Comments(0)

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#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

**1. Report Year** 2023 **2. Institution Code** 2700541

3. Institution Name (auto-

populated)

Central Coast College

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

Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a.

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.

51.3902 - Nurse/Nursing Assistant/Aide and Patient Care Assistant

(Optional)

7. Select all Standard

Occupational

Classification (SOC) Codes

that apply to this program. Select all

31-1131 - Nursing Assistants

applicable codes from the dropdown list. (Optional)

8. Number of Degrees,
Diplomas or Certificates

99

**Awarded** 

9. Total Charges for this

**Program** 

\$3,255.00

10. The percentage of enrolled students in the reporting year receiving 0 federal student loans to pay for this program

11. The percentage of

graduates in the reporting

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	101
13. Number of Students Available for Graduation	99
14. Number of On-time Graduates	99
15. Completion Rate	100
16. 150% Graduates?	0
17. 150% Completion Rate	0
18. Is the above data	
taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States	No
Department of Education?	
19. Graduates Available	00
for Employment	99
20. Graduates Employed in the Field	40
21. Placement Rate	40.40404
22a. 20 to 29 hours per week	0
22b. at least 30 hours per week	40
23a. In a single position in the field of study	40
23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)	0
23c. Freelance/self- employed	0
23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution	0
24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals	Yes

that requires clinical training? 24a. Select the Allied **Health Professions** Certified Nurse Assistant requiring clinical training. 24b. Enter the name(s) of clinical site(s). Enter the License number or **Employer Identification** number, program name, Download total number of students and the 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 Download institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed. 26. Does this educational program lead to an Yes occupation that requires State licensing? 26a. Do graduates have the option or requirement No for more than one type of licensing State exam? 27. Name of the State licensing entity that **CDPH** licenses this field 28. Name of State Exam NHA 29. Number of Graduates 89 **Taking State Exam** 30. Number Who Passed 72 the State Exam 31. Number Who Failed 17 the State Exam

80.89888

32. Passage Rate

33. Is this data from the State licensing agency that administered the exam?	Yes
33a. Name of Agency	CDPH
35. Name of the State licensing entity that licenses this field	CDPH
36. Name of State Exam	NHA
37. Number of Graduates Taking State Exam	95
38. Number Who Passed the State Exam	91
39. Number Who Failed the State Exam	4
40. Passage Rate	95.78947
41. Is this data from the State licensing agency that administered the State exam?	Yes
41a. Name of Agency	CDPH
43. Graduates Available for Employment	99
44. Graduates Employed	40
in the Field	40
\$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 \$30,001 - \$35,000	38
\$35,001 - \$40,000	2
\$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

Pending Batch Submit Analyst Review by Unassigned Status

Analyst unassigned@simpligov.com

Completed Stages:

Institution Info: ✓ 11/29/2024 05:01:14 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

Comments

Comments(0)

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#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

1. Report Year 2023 2. Institution Code 2700541

3. Institution Name (auto-

populated)

Central Coast College

4. Name of Program **Ultrasound Technician AAS** 

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.

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)

7. Select all Standard

Occupational

Classification (SOC) Codes

that apply to this program. Select all applicable codes from the dropdown list. (Optional)

8. Number of Degrees, **Diplomas or Certificates** 

**Awarded** 

9. Total Charges for this

**Program** 

\$0.00

0

10. The percentage of enrolled students in the reporting year receiving 0 federal student loans to

pay for this program

11. The percentage of graduates in the reporting

Associate

51.0910 - Diagnostic Medical Sonography/Sonographer and Ultrasound Technician

29-2032 - Diagnostic Medical Sonographers

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	0
13. Number of Students  Available for Graduation	0
14. Number of On-time Graduates	0
16. 150% Graduates?	0
18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States	No
Department of Education?	
19. Graduates Available for Employment	0
20. Graduates Employed in the Field	0
22a. 20 to 29 hours per week	0
22b. at least 30 hours per week	0
23a. In a single position in the field of study	0
23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)	0
23c. Freelance/self- employed	0
23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution	0
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
26. Does this educational	No

program lead to an	
occupation that requires	
State licensing?	
43. Graduates Available	0
for Employment	U
44. Graduates Employed	0
in the Field	U
\$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

Analyst unassigned@simpligov.com

# Completed Stages:

Institution Info: ✓ 11/29/2024 05:00:49 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

# Comments

Comments(0)

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#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

**1. Report Year** 2023 **2. Institution Code** 2700541

3. Institution Name (auto-

populated)

Central Coast College

4. Name of Program

**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.

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)

7. Select all Standard

Occupational

Classification (SOC) Codes

that apply to this

program. Select all

applicable codes from the dropdown list. (Optional)

8. Number of Degrees,

Diplomas or Certificates

**Awarded** 

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

11. The percentage of graduates in the reporting

Diploma/Certificate

51.0899 - Allied Health and Medical Assisting Services, Other

31-9092 - Medical Assistants

154

84

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	171
13. Number of Students Available for Graduation	154
14. Number of On-time Graduates	50
15. Completion Rate	32.46753
16. 150% Graduates?	87
17. 150% Completion Rate	56.49351
18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States	No
Department of Education?	
19. Graduates Available for Employment	154
20. Graduates Employed in the Field	82
21. Placement Rate	53.24675
22a. 20 to 29 hours per week	0
22b. at least 30 hours per week	82
23a. In a single position in the field of study	82
23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)	0
23c. Freelance/self- employed	0
23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution	0
24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals	Yes

that requires clinical training? 24a. Select the Allied **Health Professions** Medical Assistant requiring clinical training. 24b. Enter the name(s) of clinical site(s). Enter the License number or **Employer Identification** number, program name, Download total number of students and the 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 Download institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed. 26. Does this educational program lead to an No occupation that requires State licensing? 43. Graduates Available 154 for Employment 44. Graduates Employed 82 in the Field \$0 - \$5,000 0 \$5,001 - \$10,000 0 \$10,001 - \$15,000 0 \$15,001 - \$20,000 0 \$20,001 - \$25,000 0 0 \$25,001 - \$30,000 3 \$30,001 - \$35,000 \$35,001 - \$40,000 36 \$40,001 - \$45,000 43 \$45,001 - \$50,000 0

\$50,001 - \$55,000

\$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

Analyst unassigned@simpligov.com

# Completed Stages:

Institution Info: ✓ 11/29/2024 05:01:58 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

### Comments

### Comments(0)

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#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

1. Report Year 2023 2. Institution Code 2700541

3. Institution Name (auto-

populated)

Central Coast College

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.

list the code that most accurately corresponds to the educational program.

(Optional)

Select from the dropdown 51.3901 - Licensed Practical/Vocational Nurse Training (LPN, LVN, Cert

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

8. Number of Degrees,

Diplomas or Certificates

**Awarded** 

0

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

11. The percentage of graduates in the reporting

0

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	0
13. Number of Students  Available for Graduation	0
14. Number of On-time Graduates	0
16. 150% Graduates?	0
18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States	No
Department of Education?	
19. Graduates Available for Employment	0
20. Graduates Employed in the Field	0
22a. 20 to 29 hours per week	0
22b. at least 30 hours per week	0
23a. In a single position in the field of study	0
23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)	0
23c. Freelance/self- employed	0
23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution	0
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
26. Does this educational	No

program lead to an	
occupation that requires	
State licensing?	
43. Graduates Available	0
for Employment	Ü
44. Graduates Employed	0
in the Field	O
\$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

Analyst unassigned@simpligov.com

# Completed Stages:

Institution Info: ✓ 11/29/2024 04:59:46 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

# Comments

Comments(0)

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#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

**1. Report Year** 2023 **2. Institution Code** 2700541

3. Institution Name (auto-

populated)

Central Coast College

**4. Name of Program** Veterinary Technology

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.

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) 29-2056 - Veterinary Technologists and Technicians

8. Number of Degrees,

Diplomas or Certificates

**Awarded** 

4

9. Total Charges for this

**Program** 

\$40,220.00

10. The percentage of enrolled students in the reporting year receiving

federal student loans to

pay for this program

11. The percentage of graduates in the reporting

100

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	4
13. Number of Students Available for Graduation	4
14. Number of On-time Graduates	1
15. Completion Rate	25
16. 150% Graduates?	3
17. 150% Completion Rate	75
18. Is the above data	
taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States	No
Department of Education?	
19. Graduates Available for Employment	4
20. Graduates Employed in the Field	3
21. Placement Rate	75
22a. 20 to 29 hours per	
week	1
22b. at least 30 hours per week	2
23a. In a single position in the field of study	3
23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)	0
23c. Freelance/self- employed	0
23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution	0
24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals	No

that requires clinical	
training?	
26. Does this educational	
program lead to an	Yes
occupation that requires	
State licensing?	
26a. Do graduates have	
the option or requirement	No
for more than one type of	
licensing State exam?	
27. Name of the State	
licensing entity that	AVMA
licenses this field	
28. Name of State Exam	VTNE
29. Number of Graduates	2
Taking State Exam	_
30. Number Who Passed	1
the State Exam	_
31. Number Who Failed	1
the State Exam	1
32. Passage Rate	50
33. Is this data from the	
State licensing agency	Yes
that administered the	103
exam?	
33a. Name of Agency	AVMA
35. Name of the State	
licensing entity that	AVMA
licenses this field	
36. Name of State Exam	VTNE
37. Number of Graduates	3
Taking State Exam	3
38. Number Who Passed	1
the State Exam	_
39. Number Who Failed	2
the State Exam	_
40. Passage Rate	33.33333
41. Is this data from the	
State licensing agency	Yes
that administered the	
State exam?	
41a. Name of Agency	AVMA
43. Graduates Available	4
for Employment	
44. Graduates Employed	3
in the Field	-

\$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	1
\$35,001 - \$40,000	2
\$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

Analyst unassigned@simpligov.com

### Completed Stages:

Institution Info: ✓ 11/29/2024 04:52:09 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

### Comments

### Comments(0)

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#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

1. Report Year 2023 2. Institution Code 2700541

3. Institution Name (auto-

populated)

Central Coast College

4. Name of Program Advanced Phlebotomy

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters,

Bachelor, Associate, Diploma/Certificate

Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a.

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program.

**Select from the dropdown** 51.1009 - Phlebotomy/Phlebotomist

list the code that most accurately corresponds to the educational program.

(Optional)

7. Select all Standard

Occupational

Classification (SOC) Codes

that apply to this program. Select all applicable codes from the dropdown list. (Optional)

31-9099 - Healthcare Support Workers, All Other

8. Number of Degrees,

**Diplomas or Certificates** 

**Awarded** 

9. Total Charges for this

\$2,040.00 **Program** 

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

11. The percentage of graduates in the reporting

0

0

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	4
13. Number of Students Available for Graduation	4
14. Number of On-time Graduates	4
15. Completion Rate 16. 150% Graduates?	100 0
17. 150% Completion Rate 18. Is the above data	0
taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?	No
19. Graduates Available for Employment	0
20. Graduates Employed in the Field	0
22a. 20 to 29 hours per week	0
22b. at least 30 hours per week	0
23a. In a single position in the field of study	0
23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)	0
23c. Freelance/self- employed	0
23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution	0
24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical	No

training?	
26. Does this educational program lead to an occupation that requires State licensing?	Yes
26a. Do graduates have the option or requirement for more than one type of licensing State exam?	No
27. Name of the State licensing entity that licenses this field	California Department of Public Health
28. Name of State Exam	CPT
29. Number of Graduates Taking State Exam	11
30. Number Who Passed the State Exam	11
31. Number Who Failed the State Exam	0
32. Passage Rate	100
33. Is this data from the State licensing agency that administered the exam?	Yes
33a. Name of Agency	National Health career Association
35. Name of the State licensing entity that licenses this field	California Department of Public Health
36. Name of State Exam	CPT
37. Number of Graduates Taking State Exam	4
38. Number Who Passed the State Exam	4
39. Number Who Failed the State Exam	0
40. Passage Rate	100
41. Is this data from the State licensing agency that administered the	Yes
State exam?	
41a. Name of Agency	National Healthcareer Association
43. Graduates Available	0
for Employment	
44. Graduates Employed in the Field	
III tile rielu	0

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

Pending Batch Submit Analyst Review by Unassigned Status

Analyst unassigned@simpligov.com

## **Completed Stages:**

Institution Info: ✓ 11/29/2024 05:03:16 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

## Comments

## Comments(0)

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#### **Audit Trail**

Show detailed result

Institution Info Ready To Send by Marrisa Williams

 1. Report Year
 2023

 2. Institution Code
 2700541

3. Institution Name (auto-

populated)

Central Coast College

**4. Name of Program** Computer Specialist, Accounting

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)

7. Select all Standard

Occupational

Classification (SOC) Codes

that apply to this program. Select all applicable codes from the dropdown list. (Optional) 43-3031 - Bookkeeping, Accounting, and Auditing Clerks

52.0302 - Accounting Technology/Technician and Bookkeeping

8. Number of Degrees,

Diplomas or Certificates

**Awarded** 

10

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

11. The percentage of graduates in the reporting

73

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	16
13. Number of Students  Available for Graduation	11
14. Number of On-time Graduates	5
15. Completion Rate	45.45455
16. 150% Graduates?	6
17. 150% Completion Rate	54.54545
18. Is the above data	
Postsecondary Education Data System (IPEDS) of the United States	No
Department of Education?	
19. Graduates Available for Employment	11
20. Graduates Employed in the Field	8
21. Placement Rate	72.72727
22a. 20 to 29 hours per week	0
22b. at least 30 hours per week	8
23a. In a single position in the field of study	8
23b. In concurrent aggregated positions in the field of study (2 or more positions at the	0
same time) 23c. Freelance/self-	0
employed	Ü
23d. By the institution or an employer owned by the institution, or an	
employer who shares ownership with the institution	0
24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals	No

that requires clinical training?	
26. Does this educational program lead to an occupation that requires State licensing?	No
43. Graduates Available for Employment	11
44. Graduates Employed in the Field	8
\$0 - \$5,000	0
\$5,001 - \$10,000	0
\$10,001 - \$15,000	0
\$15,001 - \$20,000	0
\$20,001 - \$25,000	0
\$25,001 - \$30,000	0
\$30,001 - \$35,000	0
\$35,001 - \$40,000	5
\$40,001 - \$45,000	0
\$45,001 - \$50,000	2
\$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

Pending Batch Submit Analyst Review by Unassigned Status

Analyst unassigned@simpligov.com

# Completed Stages:

Institution Info: ✓ 11/29/2024 05:02:20 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

# Comments

# Comments(0)

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#### **Audit Trail**

Show detailed result

**Institution Info Ready To Send** by Marrisa Williams

**1. Report Year** 2023 **2. Institution Code** 2700541

3. Institution Name (auto-

populated)

Central Coast College

**4. Name of Program** Medical Administrative 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)

7. Select all Standard

Occupational

Classification (SOC) Codes

that apply to this program. Select all applicable codes from the dropdown list. (Optional)

8. Number of Degrees,
Diplomas or Certificates

**Awarded** 

9. Total Charges for this

**Program** 

\$19,340.00

10. The percentage of enrolled students in the reporting year receiving 67

federal student loans to pay for this program

11. The percentage of graduates in the reporting

73

51.0799 - Health and Medical Administrative Services, Other

43-3021 - Billing and Posting Clerks

year who took out federal student loans to pay for this program	
12. Number of Students Who Began the Program	4
13. Number of Students Available for Graduation	3
14. Number of On-time Graduates	0
15. Completion Rate	0
16. 150% Graduates?	3
17. 150% Completion Rate	100
18. Is the above data	
taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States	No
Department of Education?	
19. Graduates Available for Employment	3
20. Graduates Employed in the Field	1
21. Placement Rate	33.33333
22a. 20 to 29 hours per week	0
22b. at least 30 hours per week	1
23a. In a single position in the field of study	1
23b. In concurrent	
aggregated positions in the field of study (2 or more positions at the same time)	0
23c. Freelance/self- employed	0
23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the	0
institution  24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals	No

that requires clinical	
training?	
26. Does this educational	
program lead to an	No
occupation that requires	110
State licensing?	
43. Graduates Available	3
for Employment	9
44. Graduates Employed	1
in the Field	-
\$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	1
\$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

Pending Batch Submit Analyst Review by Unassigned Status

Analyst unassigned@simpligov.com

# Completed Stages:

Institution Info: ✓ 11/29/2024 05:01:36 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

0 Comments 0 Emails

# Comments

# Comments(0)

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#### **Audit Trail**

Show detailed result

Institution Info Ready To Send by Marrisa Williams

1. Report Year 2023 2. Institution Code 2700541

3. Institution Name (autopopulated)

Central Coast College

4. Street Address (Physical

Location)

111 East Navajo Drive

5. City Salinas 6. State CA 7. Zip Code 93906

8. Select the type of

business organization for

this institution

For profit corporation

9. Number of Branch

Locations

0

10. Number of Satellite

Locations

0

**Upload completed Excel** 

or CSV here

AR LaborMarketData 2023.xlsx

11a. Is this institution

current with all

assessments to the

Yes

**Student Tuition Recovery** 

Fund?

11b. Is this institution current on Annual Fees?

Yes

12. Is your institution accredited by an

accrediting

agency/agencies

Yes

recognized by the United **States Department of** 

Education?

12a. Accrediting Agency (more than one agency

may be selected)

Accrediting Council for Continuing Education and Training

14. Has any accreditation agency taken any final disciplinary action against this institution in the reporting year? Indicate "yes" if the institution has

No

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. 15. Does your institution

participate in federal financial aid programs under Title IV of the **Federal Higher Education** Act? (This includes federal

Yes

loans and grants)

15a. What is the total amount of Title IV funds

received by your \$5,500,875.00

institution in this **Reporting Year?** 

16. Does your institution participate in veterans'

financial aid education

programs?

16a. What is the total amount of veterans' financial aid funds

received by your

institution in this **Reporting Year?** 

17. Does your institution

participate in the Cal

**Grant program?** 

17a. What is the total amount of Cal Grant

Funds received by your

institution in this **Reporting Year?** 

18. Is your institution on

California's Eligible

**Training Provider List** 

(ETPL)?

19. Is your institution receiving funds from the

**Work Innovation and Opportunity Act (WIOA)** 

Program?

Yes

\$21,117.00

Yes

\$164,991.00

Yes

No

20. Does your Institution participate in, or offer, any other state or federal Yes government financial aid programs? (i.e., vocational rehab...) 20a. You indicated "Yes" for #20, please provide Vocational Rehab the name of the financial aid program below. 20b. What is the total amount of any other state \$27,795.00 or federal funds received by your institution in the reporting year? 21. Provide the percentage of institutional income 98 during this Reporting Year derived from public funding. 22. Does your Institution participate in, or offer any non-government financial Yes aid programs? (i.e., private grants/loans, institutional grants/loans) 22a. You indicated "Yes" for #22, please provide Private loans the name of the financial aid programs below. 23. The percentage of institutional income in the reporting year derived 0 from any non-government financial aid. 24. Enter the most recent three-year cohort default rate reported by the U.S. 0 **Department of Education** for this institution, if applicable. 25. Provide the percentage of the students who attended 82 this institution during this Reporting Year who received federal student

loans to help pay their cost of education at the school.

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

\$8,054.58

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.

843

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)** 

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

30. Number of Master Degree Programs Offered? 0 Indicate the number of

cancellation period.

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.

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)
- 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 145 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 9 **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

698

cancellation period. **Total Program Count** 11

number of students who cancelled during the

**Institution's Website** https://centralcoastcollege.edu/

38. Upload School

CCC PBBE SPF 22 2023.pdf **Performance Fact Sheet** 

39. Upload Catalog CCC Catalog 2023.docx

40. Upload Enrollment

CCC EA.docx **Agreement** 

\*\*\* NOTES \*\*\*

Pending Batch Submit Analyst Review by Unassigned Status

**Analyst** unassigned@simpligov.com

## Completed Stages:

Institution Info: ✓ 11/29/2024 04:52:50 PM - Marrisa Williams

Pending Batch Submit: ✓ 11/29/2024 05:09:13 PM - Unassigned Status

## **Uploaded Files**

Name	Uploaded by	Version	Source
AR_LaborMarketData_2023.xlsx	Marrisa Williams	1	Upload completed Excel or CSV here
CCC Catalog 2023.docx	Marrisa Williams	1	39. Upload Catalog
CCC EA.docx	Marrisa Williams	1	40. Upload Enrollment Agreement
2022 2023 BPPE SPFS CCC.pdf	Marrisa Williams	1	38. Upload School Performance Fact Sheet
CCC PBBE SPF 22_2023.pdf	Marrisa Williams	1	38. Upload School Performance Fact Sheet

0 Comments 0 Emails

## Comments

## Comments(0)

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#### **Audit Trail**

Show detailed result

Batch Info Analyst Review by Marrisa Williams

**1. Report Year** 2023 **2. Institution Code** 2700541

3. Institution Name (auto-

populated)

Central Coast College

4. Name of Responsible

Officer submitting online

MARRISA WILLIAMS

**Annual Report?** 

5. Responsible Officer -

Phone

(661) 337-1073

6. Responsible Officer -

**Email** 

mwilliams@hdmc.edu

7. Have you completed ONE Institution Data

workflow for this Annual

Yes

Report online submission?

8. Have you completed ONE Program Data workflow PER OFFERED

**PROGRAM for this Annual** 

Yes

Report online submission?

9. Have you completed

**ONE Branch Data** 

workflow PER BRANCH

**LOCATION** for this Annual

Yes

Report online submission?

10. Have you completed

**ONE Satellite Data** 

workflow PER SATELLITE

**LOCATION** for this Annual

No Satellite Locations

Report online submission?

Signed By: Marrisa Williams - mwilliams@HDMC.edu

**Signature** Date Signed: 11/29/2024 5:09:11 PM -08:00 GMT

IP Address: 50.91.141.58

11/29/2024

Analyst bppe.annualreport@dca.ca.gov

Completed Stages:

0 Comments 0 Emails		
Comments		
Comments(0)		

**Batch Info:** ✓ 11/29/2024 05:09:11 PM - Marrisa Williams

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