College 360

Log Off

Timeout: 44.9 minutes

Annual Report | Programs | School Info | DMS | HELP ?

Annual Report: **2026** School Number: **042458** School Name: **Not an active school** Type: **Main** Annual Report Status: **Not Submitted**

Address1: **1234 ABC Street** City: **Arlington** State: **VA** Zip: **22201**

Approved Programs

Annual Report

View

Submitted

PES Forms

View | Add | Edit | Delete

School Number: 042458

Annual Report 2026

G & E Charts

View | Add | Edit | Delete

RETENTION Charts

View | Add | Edit | Delete

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Annual Report: **2026** School Number: **042458** School Name: **Not an active school** Type: **Main** Annual Report Status:

Address1: **1234 ABC Street** City: **Arlington** State: **VA** Zip: **22201**

Cancel

Report Prepared by:	
Report Completed by:	
Report Completed by Email:	

PART 1 - SCHOOL DEMOGRAPHIC DATA

School Director	Salutation:		Director Email:	ar@accsc.org
First Name:			Last Name:	
How long has the school director been in the position at the school?	Years: 0 Months: 0			
			Unemployment Rate:	%
Demographic Location:			Median Yearly Household Income:	
Website Directory Email:				
Official Correspondence Name:	Sample Name	Official Correspondence Email:		
Official Correspondence Name:		Official Correspondence Email:		
Chief Executive Officer Name:		Chief Executive Officer Email:		

PART 1A - ADDITIONAL CONTACTS

Department Director(s)

	Name	Email Address
1.	Test	ar@accsc.org
2.	Test2	ar@accsc.org
3.		
4.		
5.		

ACCSC Volunteer(s)

	Name	Email Address
1.	Test	
2.		

PART 2 - OPERATIONS

How is the school legally established?

☐ Check this box if there are legal actions pending against the school

If checked, please provide a brief summary:

Other accrediting agencies:

Was the school operating under a Warning, Probation or on Reporting as issued by any other regulatory agency (ex. accrediting agency, state) between July 1, 2025 and June 30, 2026? If so, select all that a

☐ Warning ☐ Show Cause Order ☐ Probation ☐ Reporting

If so, please provide a brief summary about the current status:

Was the school operating under a Warning, Probation or on Reporting or Heightened Monitoring as issued by ACCSC between July 1, 2025 and June 30, 2026? If so, select all that apply:

☐ Warning ☐ Show Cause Order ☐ Probation ☐ Reporting ☐ Heightened Monitoring

☐ Check this box if any program reviews or audits, not including fiscal year end audit of financial statements, have been conducted by federal, state, or private agencies.

If so, please provide a brief summary about the current status:

PART 2a - OWNERSHIP

☐ Check this box if a Corporation owns the school

Corporation Name:			
Corporation Address:		City:	
State:		Zip:	
Phone:		Fax:	

☐ Check this box if another Corporation/individual owns stock of the corporation that owns the school ☐ Check this box if the school is publicly traded

Level 1: Identify the legal entity or individual(s) who directly owns 5% or more of the school. **If a corporation is identified above, copy it here.**

Name:	Percentage: %	Name:	Percentage: %
Name:	Percentage: %	Name:	Percentage: %

Name:	Percentage: %	Name:	Percentage: %
Name:	Percentage: %	Name:	Percentage: %
Name:	Percentage: %	Name:	Percentage: %

If more than one level of ownership exists between the entity that directly owns the school and the ultimate owners, identify each entity and percentage of ownership in the ownership chain, up to and including the par

Level 2		Level 3		Level 4		
Name:	Percentage: %	Name:	Percentage: %	Name:	Percentage: %	Name:
Name:	Percentage: %	Name:	Percentage: %	Name:	Percentage: %	Name:
Name:	Percentage: %	Name:	Percentage: %	Name:	Percentage: %	Name:
Name:	Percentage: %	Name:	Percentage: %	Name:	Percentage: %	Name:
Name:	Percentage: %	Name:	Percentage: %	Name:	Percentage: %	Name:

Identify the individuals who own 10% or more of the final legal entity (ultimate parent).

Name:	Percentage: %	Name:	Percentage: %
Name:	Percentage: %	Name:	Percentage: %
Name:	Percentage: %	Name:	Percentage: %
Name:	Percentage: %	Name:	Percentage: %
Name:	Percentage: %	Name:	Percentage: %

PART 2b - NON-PROFIT BOARD MEMBERS

☐ If the school is part of/owned by a non-profit organization/corporation, this certifies that an individual/entity group (owner or manager) that has any financial interest in the non-profit organization/corporation does not serve as a board member, have a seat on the Board, or is not a member of the non-profit corporation.

Board Chair

Name:

Board Member Names

Name:	Name:
Name:	Name:
Name:	Name:
Name:	Name:
Name:	Name:
Name:	Name:
Name:	Name:
Name:	Name:
Name:	Name:
Name:	Name:

PART 2c - OPERATIONAL DATA

◯ Yes ◯ No Does the school have approval to offer a degree program?

◯ Yes ◯ No Does the school have ACCSC approval to offer any portion of a program via Distance Education?

◯ Yes ◯ No If yes, does the school offer any programs via 100% Distance Education?

◯ Yes ◯ No Does the school have ACCSC approval to offer any avocational / continuing education courses?

◯ Yes ◯ No Does the school admit Ability-to-Benefit students?

◯ Yes ◯ No Through your standard procedure (not only as part of your renewal), have you or will you have a third party review your employment information?

If yes, what company do you use or plan on using?

Fiscal Year-End	Individual School Gross Tuition Revenue	Financial Aid Participant: ◯ Yes ◯ No	OPEID:
Most Recent:		3-Year Cohort Default Rate 2023: %	
2nd Most Recent:		3-Year Cohort Default Rate 2022: %	
3rd Most Recent:		3-Year Cohort Default Rate 2021: %	

PART 2d - SUBSTANTIVE CHANGES July 1, 2025 - June 30, 2026

◯ Yes ◯ No Did the school change location?

◯ Yes ◯ No Did the school change its name?

◯ Yes ◯ No Did the school establish a separate facility?

◯ Yes ◯ No Did the school Teach-Out or discontinue any programs?

◯ Yes ◯ No Did the school modify the clock or credit hours for any program?

◯ Yes ◯ No Did the school offer any new programs?

◯ Yes ◯ No Did the school offer a degree program for the first time?

◯ Yes ◯ No Did the school change in ownership/control?

◯ Yes ◯ No If so, did the school submit an application for a change of ownership/control?

PART 3 - CHARACTERISTICS OF STUDENT ENROLLMENT

Student Enrollment - July 1, 2025:	
Additional enrollments: July 1, 2025 - June 30, 2026	
Total Enrollments:	**Label**
Students Graduated: July 1, 2025 - June 30, 2026	
Students who withdrew or were terminated: July 1, 2025 - June 30, 2026	
Total Enrollment as of June 30, 2026:	**Label**
If there are zero student enrollments for July 1, 2025 and/or June 30, 2026, please provide a brief explanation:	
Percentage of students receiving:	
Title IV Financial Assistance:	
Title IV Pell Grants:	
Title IV Loans:	
Non-Title IV Assistance:	
How many hours did faculty, staff and students devote to Community Service projects and activities organized by the school?:	
Total student enrollment in any avocational / continuing education courses: July 1, 2025 - June 30, 2026	

Cancel

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Address1:	1234 ABC Street	City:	Arlington	State:	VA	Zip:	22201		

Cancel | Complete | Save

PROGRAM ENROLLMENT SUMMARY

ACCSC Approved Program Title:	Sample Program		
Program Code:	1999		
Credential:	Diploma		
Date Approved by ACCSC:	06/30/2026		
Program Approval Type:	Occupational		
Program Length in Months:	8		
Approved Clock Hours:	720	Total Tuition:	
Approved Credit Hours:	30	Additional Expenses:	
Credit Hour Type	Semester	Average starting salary for graduates:	
An externship is offered as a part of the program.			
Externship clock hours:	0		
Externship credit hours	0		

LICENSURE/CERTIFICATION EXAMINATION ADMINISTERING AGENCY

Licensure or Certification Examination is required for Employment ○ Yes ○ No

ENROLLMENT DATA

Is there reportable data on the Graduation & Employment ("G&E") Chart for this program? ○ Yes ○ No

Do students take any portion of the program via Distance Education ○ Yes ○ No

Satellite Location Enrollment ○ Yes ○ No

Graduated Between 7/1/25 and 6/30/26			
i. Employed in field:			
ii. Employed in unrelated field:			
iii. Further Ed: 4 year college:			
iv. Further Ed: 2 year college:			
v. Further Ed: Trade school:			
vi. Further Ed: Other Training:			
vii. Unemployed:			
viii. Unknown:			
ix. Incarcerated:			
x. Military:			
xi. Death:			
xii. Medical:			
xiii. International:			
Total Graduated:	**0**		

Withdrew or Terminated Between 7/1/25 and 6/30/26			
i. Employed in field:			
ii. Employed in unrelated field:			
iii. Incarcerated:			
iv. Military Service:			
v. Death:			
vi. Medical:			
vii. International Student:			
viii. Financial/Family:			
ix. Moved from area:			
x. Personal Reasons:			
xi. Attendance:			
xii. Academic:			
xiii. Transfer within school:			
xiv. Other:			
xv. Unknown:			
Total Withdrew or Terminated:	**0**		
Total Number of Students Enrolled as of 6/30/26:	**0**		

For the following questions, please identify the characteristics for students enrolled as of 6/30/26			
a. No HS Diploma/GED:		a. Under 25:	
b. GED:		b. 25-34:	
c. HS Diploma:		c. 35-44:	
d. Post-Secondary:		d. 45-Over:	
e. Associates:		**Total by Age:**	**0**
f. Baccalaureate:		a. White:	
g. Post Baccalaureate:		b. Black or African American:	
Total by Credential:	**0**	c. Hispanic/Latino:	
a. Male:		d. Asian:	
b. Female:		e. American Indian or Alaska Native:	
c. Not disclosed		f. Native Hawaiian or Other Pacific Islander	
Total by Gender:	**0**	g. Two or more races	
		h. Race and Ethnicity unknown:	
		Total by Ethnicity:	**0**
Cancel			Save

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GRADUATION AND EMPLOYMENT CHART

You must SAVE the G&E form to calculate totals

Cancel | Complete | Save

Approved Program Title:	Sample Program				
Program Code:	1999				
Credential:	Diploma				
Report Date:	7/2026	Program Length in Months:			
Beginning Date:		End Date:		CALCULATE	

Is this chart for a satellite location? ○ Yes ○ No

Is this chart for a program offered 100% via Distance Education? ○ Yes ○ No

REPORTING PERIOD

Class Start Date (eg 01/21):													**Total**	**%**
Number Started:													####	
Transfers to Another Program/Cohort:													####	###%
Transfers from Another Program/Cohort:													####	###%
Total Starts (+/- Transfers):	####	####	####	####	####	####	####	####	####	####	####	####	####	
Unavailable for Graduation:													####	###%
Students Available For Graduation:	####	####	####	####	####	####	####	####	####	####	####	####	####	###%
Withdrawn/Terminated Students:													####	###%
Graduates within 150% Program Length:	####	####	####	####	####	####	####	####	####	####	####	####	####	###%

GRADUATION RATE	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%		###%
Graduates - Further Education:													####	###%
Graduates - Unavailable for Employment:													####	###%
Graduates - Available for Employment:	####	####	####	####	####	####	####	####	####	####	####	####	####	###%
Graduates - Employed in Field:													####	###%
EMPLOYMENT RATE	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%		###%
Graduates - Unrelated Occupation:													####	###%
Graduates - Unemployed:													####	###%
Graduates - Unknown:													####	###%
Non-Graduated Students Who Obtained Training Related Employment													####	###%
Employment Rate with Non-Graduated Employed Students	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%		###%

LICENSURE / CERTIFICATION EXAMINATION PASS RATES CHART														
Licensure / Certification Name:														
1. Class Start Date:														
2. Number of Graduates:													####	
3. # of Graduates Taking Exam:													####	
4. # of Graduates Passing Exam:													####	
5. Percentage of Grads Passing Exam:	####	####	####	####	####	####	####	####	####	####	####	####	####	Avg.
Licensure / Certification Examination Agency Rate:													####	####
Cancel												Save		

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RETENTION CHART

Cancel | Complete | Save

Approved Program Title	Sample Program				
Program Code	1999				
Credential	Diploma				
Report Date	7/2026	Program Length in Months:			
Cohort Start Date		Cohort End Date:		CALCULATE	

REPORTING PERIOD

1	Cohort Start Date (e.g. 01/21)													Total
2	Percentage of Program Completed as of Report Date	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	
3	Percentage of Program Remaining as of Report Date	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	###%	
4	Number Started													####
5	Transfers to Another Program													####
6	Transfers from Another Program													####
7	**Total Starts (+/- Transfers)**	####	####	####	####	####	####	####	####	####	####	####	####	###
8	Unavailable for Retention													####
9	**Students Available For Retention**	####	####	####	####	####	####	####	####	####	####	####	####	###
10	Withdrawn/Terminated Students													####
11	**Total Retained Students**	####	####	####	####	####	####	####	####	####	####	####	####	###
12	**Cohort Retention Rate**	####%	####%	####%	####%	####%	####%	####%	####%	####%	####%	####%	####%	

13	**Percentage of Program Completed**	**15%**	**25%**	**50%**	**75%**
14	Total Students Retained	####	####	####	####
15	Total Students	####	####	####	####
16	**Program Retention Rates**	**####**%	**####**%	**####**%	**####**%

Cancel

Save