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### **BPPE Annual Report for 2015 – Programs**

**Tracking Number:**2016113021702

**Report for Year:** 2015

**Institution Code:**3803411

#### **INFORMATION FOR EACH EDUCATIONAL PROGRAM OFFERED AT THE INSTITUTION**

**Degree/Program Level:** DiplomaCertificate

**If Other, please specify:**

**Degree/Program Title:** DiplomaCertificate

**If Other Doctorate, Other Master, Other Bachelor, Other Associate or Other was chosen, please specify:**

**Name of Program (e.g. Business Administration, Massage, etc.):**Apprenticeship

**Number of Degrees or Diplomas Awarded:**0

**Total Charges for this program (Report whole dollars only):**\$ 3100

**Number of Students Who Began the Program:**0

**Students Available for Graduation:**0

**On-time Graduates:**0

**Completion Rate:**0

**150% Completion Rate:**0

**Is the above data taken from the data that was reported to and calculated by the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of**

**Education?:**

no

**PLACEMENT**

**Graduates Available for Employment:** 0

**Graduates Employed in the Field:** 0

**Placement Rate:** 0

**Graduates employed in the field 20 to 29 hours per week:** 0

**Graduates employed in the field at least 30 hours per week:** 0

**Indicate the number of graduates employed:**

**Single position in field:** 0

**Concurrent aggregated positions in field (2 or more positions at the same time):** 0

**Freelance/self-employed:** 0

**By the institution or an employer owned by the institution, or an employer who shares ownership with the institution:** 0

**EXAM PASSAGE RATE**

**Does this educational program lead to an occupation that requires licensing?:** yes

**If Yes, please provide the information below (For each of the last two years):**

**First Data Year (YYYY):** 2014

**Name of the licensing entity that licenses this field:** Department of Public Health, City of San Francisco

**Name of Exam:** Massage Practitioner License

**Number of Graduates Taking Exam:** 0

**Number Who Passed the Exam:** 0

**Number Who Failed the Exam:** 0

**Passage Rate:** 0

**Is this data from the licensing agency that administered the exam?:** no

**Name of Agency:**

**If the response to #28 was no, provide a description of the process used for attempting to contact students:**

Email & Telephone

**Second Data Year (YYYY)2014**

**Name of the licensing entity that licenses this field:**Department of Public Health, City of San Francisco

**Name of Exam:**Massage Practitioner License

**Number of Graduates Taking Exam:**0

**Number Who Passed the Exam:**0

**Number Who Failed the Exam:**0

**Passage Rate:** 0

**Is this data from the licensing agency that administered the exam?:** no

**Name of Agency:**

**If the response to #37 was no, provide a description of the process used for attempting to contact students:**

Email & telephone

**Do graduates have the option or requirement for more than one type of licensing exam?:**

**Provide the names of other licensing exam options:**

**Name of Option/Requirement:** Christopher Malek

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#### **SALARY DATA**

**Graduates Available for Employment:**0

**Graduates Employed in the Field:**0

**Graduates Employed in the Field Reported Receiving the following Salary or Wage:**

**\$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**