



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in your [Program](#) data

### **BPPE Annual Report for 2016 - Institution**

**Tracking Number:** 2018021571124

**Report for Year:** 2016

**Institution Name:** L.A. VOCATIONAL INSTITUTE

**Institution Code (If an institution has branch locations the institution code is the school code for the main location):** 1939591

**Street Address (Physical Location):** 3550 Wilshire Boulevard, Suite 809

**City:** LOS ANGELES

**State:** California

**Zip Code:** 90010

**Check all that apply to this institution:**

**For profit institution:** For profit institution

**Sole Proprietor:** Sole Proprietor

**Corporation:**

**Non-profit institution:**

**Limited Liability Corporation (LLC):**

**Publicly traded institution:**

**Partnership:**

**Number of Branch Locations:** 0

**Number of Satellite Locations:** 2

**Is this institution current with all assessments to the Student Tuition Recovery Fund?:** yes

**Is this institution current on Annual Fees?:** yes

**Is your institution accredited by an accrediting agency/agencies recognized by the United States Department of Education? Include only full institutional approval, not**

**programmatic approval:** no

**If you answered yes to the question above, please identify the accrediting agency:**

**If your institution has specialized accreditation from a recognized United States Department of Education approved specialized/programmatic accreditor, list the accreditation:** N/A

**Has any accreditation agency taken any formal disciplinary action against this institution? If Yes, please submit a paper copy of the action, refer to the Annual Report Completion Check Sheet.:** no

**Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act?:** no

**What is the total amount of Title IV funds received by your institution in 2016?:** 0

**Does your institution participate in veteran's financial aid education programs?:** yes

**What is the total amount of veteran's financial aid funds received by your institution in 2016?:** 3950

**Does your institution participate in the Cal Grant program?:** no

**What is the total amount of Cal Grant funds received by your institution in 2015?:** 0

**Is your institution on the California Eligible Training Provider List (ETPL)?:** yes

**Is your institution receiving funds from the Work Innovation and Opportunity Act (WIOA) Program?:** yes

**What is the total amount of WIOA funds received by your institution in 2016?:** 46066

**Does your institution participate in, or offer any another government or non-governmental financial aid programs?** no

**If yes, please indicate the name of the financial aid program:**

**The percentage of institutional income in 2016 that was derived from public funding:** 15

**Enter the most recent three-year Cohort Default Rate reported by the US Department of Education, for this institution:** N/A

**The percentage of students who in 2016 received federal student loans to help pay their cost of education at the school was:** N/A

**Total number of students enrolled at this institution:** 299

**Number of Doctorate Degrees programs Offered:** 0

**Number of Students enrolled in Doctorate level programs at this Institution:** 0

**Number of Master Degrees programs Offered:** 0

**Number of Students enrolled in Master level programs at this institution:** 0

**Number of Bachelor Degrees programs Offered:** 0

**Number of Students enrolled in Bachelor level programs at this institution: 0**

**Number of Associate Degrees programs Offered: 0**

**Number of Students enrolled in Associate level programs at this institution: 0**

**Number of Diploma or Certificate Programs Offered: 8**

**Number of Students enrolled in Diploma or Certificate programs at this institution: 299**

**Institution's website:** [www.lavocational.com](http://www.lavocational.com)

**Performance Fact Sheet:** <https://www.lavocational.com/disclosures/>

**2016 Catalog:** <https://www.lavocational.com/disclosures/>

**Annual Report:** <https://www.lavocational.com/disclosures/>



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 20171201101625

**Report for Year:** 2016

**Institution Name:** L.A. VOCATIONAL INSTITUTE

**Institution Code:** 1939591

#### **INFORMATON 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.):** Certified Nurse Assistant

**Number of Degrees or Diplomas Awarded:** 7

**Total Charges for this program (Report whole dollars only):** \$ 875

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**Number of Students Who Began the Program:** 9

**Students Available for Graduation:** 9

**On-time Graduates:** 7

**Completion Rate:** 78

**150% Completion Rate:** 0

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

no

**PLACEMENT****Graduates Available for Employment: 7****Graduates Employed in the Field: 7****Placement Rate: 100****Graduates employed in the field 20 to 29 hours per week: 0****Graduates employed in the field at least 30 hours per week: 7****Indicate the number of graduates employed:****Single position in field: 7****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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: yes****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field: CALIFORNIA DEPARTMENT OF PUBLIC HEALTH****Name of Exam: CERTIFIED NURSE ASSISTANT****Number of Graduates Taking State Exam: 7****Number Who Passed the State Exam: 7****Number Who Failed the State Exam: 0****Passage Rate: 100****Is this data from the State licensing agency that administered the exam?: yes****Name of Agency: AMERICAN RED CROSS****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field: CALIFORNIA DEPARTMENT OF PUBLIC HEALTH**

**Name of State Exam:** CERTIFIED NURSE ASSISTANT

**Number of Graduates Taking State Exam:** 6

**Number Who Passed the State Exam:** 6

**Number Who Failed the State Exam:** 0

**Passage Rate:** 100

**Is this data from the licensing agency that administered the State exam?:** yes

**Name of Agency:** AMERICAN RED CROSS

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **SALARY DATA**

**Graduates Available for Employment:** 7

**Graduates Employed in the Field:** 7

**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:** 3

**\$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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 20180126101238

**Report for Year:** 2016

**Institution Name:** L.A. Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Central Venous Catheter  
(CVC)/Vanous Access (VA)

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

**Total Charges for this program (Report whole dollars only):** \$ 0

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0**

#### **EXAM PASSAGE RATE**

**Does this educational program lead to an occupation that requires State licensing?: no**

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

**First Data Year 2016:**

**Name of the State licensing entity that licenses this field:**

**Name of Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

**If the response to #29 was no, provide a description of the process used for attempting to contact students:**

**Second Data Year 2015:**

**Name of the State licensing entity that licenses this field:**

**Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012620223

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** ESL - Level I

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

**Total Charges for this program (Report whole dollars only):** \$ 160

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:****Name of Exam:****Number of Graduates Taking State Exam:****Number Who Passed the State Exam:****Number Who Failed the State Exam:****Passage Rate:****Is this data from the State licensing agency that administered the exam?:****Name of Agency:****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:****Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012620400

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** ESL - Level II

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

**Total Charges for this program (Report whole dollars only):** \$ 160

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:****Name of Exam:****Number of Graduates Taking State Exam:****Number Who Passed the State Exam:****Number Who Failed the State Exam:****Passage Rate:****Is this data from the State licensing agency that administered the exam?:****Name of Agency:****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:****Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012620519

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** ESL - Level III

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

**Total Charges for this program (Report whole dollars only):** \$ 160

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:****Name of Exam:****Number of Graduates Taking State Exam:****Number Who Passed the State Exam:****Number Who Failed the State Exam:****Passage Rate:****Is this data from the State licensing agency that administered the exam?:****Name of Agency:****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:****Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012620736

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** ESL - Level IV

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

**Total Charges for this program (Report whole dollars only):** \$ 160

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:****Name of Exam:****Number of Graduates Taking State Exam:****Number Who Passed the State Exam:****Number Who Failed the State Exam:****Passage Rate:****Is this data from the State licensing agency that administered the exam?:****Name of Agency:****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:****Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 20171201114743

**Report for Year:** 2016

**Institution Name:** L.A. VOCATIONAL INSTITUTE

**Institution Code:** 1939591

#### **INFORMATON 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.):** Home Health Aide

**Number of Degrees or Diplomas Awarded:** 6

**Total Charges for this program (Report whole dollars only):** \$ 775

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**Number of Students Who Began the Program:** 6

**Students Available for Graduation:** 6

**On-time Graduates:** 6

**Completion Rate:** 100

**150% Completion Rate:** 0

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

no

**PLACEMENT****Graduates Available for Employment: 6****Graduates Employed in the Field: 6****Placement Rate: 100****Graduates employed in the field 20 to 29 hours per week: 0****Graduates employed in the field at least 30 hours per week: 6****Indicate the number of graduates employed:****Single position in field: 6****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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: yes****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field: CALIFORNIA DEPARTMENT OF PUBLIC HEALTH****Name of Exam: HOME HEALTH AIDE****Number of Graduates Taking State Exam: 6****Number Who Passed the State Exam: 6****Number Who Failed the State Exam: 0****Passage Rate: 100****Is this data from the State licensing agency that administered the exam?: yes****Name of Agency: AMERICAN RED CROSS****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field: CALIFORNIA DEPARTMENT OF PUBLIC HEALTH**

**Name of State Exam:** HOME HEALTH AIDE

**Number of Graduates Taking State Exam:** 6

**Number Who Passed the State Exam:** 6

**Number Who Failed the State Exam:** 0

**Passage Rate:** 100

**Is this data from the licensing agency that administered the State exam?:** yes

**Name of Agency:** AMERICAN RED CROSS

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **SALARY DATA**

**Graduates Available for Employment:** 6

**Graduates Employed in the Field:** 6

**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:** 2

**\$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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012694809

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Vocational Nursing (LVN)

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

**Total Charges for this program (Report whole dollars only):** \$ 26325

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: yes****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:** Board of Vocational Nursing and Psychiatric Technicians**Name of Exam:** NCLEX**Number of Graduates Taking State Exam: 0****Number Who Passed the State Exam: 0****Number Who Failed the State Exam: 0****Passage Rate: 0****Is this data from the State licensing agency that administered the exam?: yes****Name of Agency:** BVNPT**If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:** Board of Vocational Nursing and Psychiatric Technicians

**Name of State Exam:** NCLEX

**Number of Graduates Taking State Exam:** 0

**Number Who Passed the State Exam:** 0

**Number Who Failed the State Exam:** 0

**Passage Rate:** 0

**Is this data from the licensing agency that administered the State exam?:** yes

**Name of Agency:** BVNPT

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012624606

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Massage Therapist I

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

**Total Charges for this program (Report whole dollars only):** \$ 2675

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:** California Massage Therapy Council**Name of Exam:** MBLEx**Number of Graduates Taking State Exam: 0****Number Who Passed the State Exam: 0****Number Who Failed the State Exam: 0****Passage Rate: 0****Is this data from the State licensing agency that administered the exam?: no****Name of Agency:** FSMTB**If the response to #29 was no, provide a description of the process used for attempting to contact students:**

Contact students via phone and email

**Second Data Year 2015:**

**Name of the State licensing entity that licenses this field:** California Massage Therapy Council

**Name of State Exam:** MBLEx

**Number of Graduates Taking State Exam:** 0

**Number Who Passed the State Exam:** 0

**Number Who Failed the State Exam:** 0

**Passage Rate:** 0

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

**Name of Agency:** FSMTB

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

Contact students via phone and email

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012623949

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Massage Therapist II

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

**Total Charges for this program (Report whole dollars only):** \$ 3875

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:** California Massage Therapy Council**Name of Exam:** MBLEx**Number of Graduates Taking State Exam: 0****Number Who Passed the State Exam: 0****Number Who Failed the State Exam: 0****Passage Rate: 0****Is this data from the State licensing agency that administered the exam?:****Name of Agency:****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:** California Massage Therapy Council

**Name of State Exam:** MBLEx

**Number of Graduates Taking State Exam:** 4

**Number Who Passed the State Exam:** 4

**Number Who Failed the State Exam:** 0

**Passage Rate:** 100

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

**Name of Agency:** FSMTB

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

Contact students via phone and email

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012624348

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Massage Therapy

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

**Total Charges for this program (Report whole dollars only):** \$ 1625

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:** California Massage Therapy Council**Name of Exam:** MBLEx**Number of Graduates Taking State Exam: 0****Number Who Passed the State Exam: 0****Number Who Failed the State Exam: 0****Passage Rate: 0****Is this data from the State licensing agency that administered the exam?: no****Name of Agency:** FSMTB**If the response to #29 was no, provide a description of the process used for attempting to contact students:**

Contact students via phone and email

**Second Data Year 2015:**

**Name of the State licensing entity that licenses this field:** California Massage Therapy Council

**Name of State Exam:** MBLEx

**Number of Graduates Taking State Exam:** 0

**Number Who Passed the State Exam:** 0

**Number Who Failed the State Exam:** 0

**Passage Rate:** 0

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

**Name of Agency:** FSMTB

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

Contact students via phone and email

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012624208

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Massage Therapy III

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

**Total Charges for this program (Report whole dollars only):** \$ 5775

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:** California Massage Therapy Council**Name of Exam:** MBLEx**Number of Graduates Taking State Exam: 0****Number Who Passed the State Exam: 0****Number Who Failed the State Exam: 0****Passage Rate: 0****Is this data from the State licensing agency that administered the exam?: no****Name of Agency:** FSMTB**If the response to #29 was no, provide a description of the process used for attempting to contact students:**

Contact students via phone and email

**Second Data Year 2015:**

**Name of the State licensing entity that licenses this field:** California Massage Therapy Council

**Name of State Exam:** MBLEx

**Number of Graduates Taking State Exam:** 0

**Number Who Passed the State Exam:** 0

**Number Who Failed the State Exam:** 0

**Passage Rate:** 0

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

**Name of Agency:** FSMTB

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

Contact students via phone and email

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012625223

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Medical Coding and  
Billing

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

**Total Charges for this program (Report whole dollars only):** \$ 3275

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0**

#### **EXAM PASSAGE RATE**

**Does this educational program lead to an occupation that requires State licensing?: no**

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

**First Data Year 2016:**

**Name of the State licensing entity that licenses this field:**

**Name of Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

**If the response to #29 was no, provide a description of the process used for attempting to contact students:**

**Second Data Year 2015:**

**Name of the State licensing entity that licenses this field:**

**Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 20171201112922

**Report for Year:** 2016

**Institution Name:** L.A. VOCATIONAL INSTITUTE

**Institution Code:** 1939591

#### **INFORMATON 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.):** Medical Assistant

**Number of Degrees or Diplomas Awarded:** 4

**Total Charges for this program (Report whole dollars only):** \$ 5575

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**Number of Students Who Began the Program:** 5

**Students Available for Graduation:** 5

**On-time Graduates:** 4

**Completion Rate:** 80

**150% Completion Rate:** 0



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

no

**PLACEMENT****Graduates Available for Employment: 4****Graduates Employed in the Field: 4****Placement Rate: 100****Graduates employed in the field 20 to 29 hours per week: 0****Graduates employed in the field at least 30 hours per week: 4****Indicate the number of graduates employed:****Single position in field: 4****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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:****Name of Exam:****Number of Graduates Taking State Exam:****Number Who Passed the State Exam:****Number Who Failed the State Exam:****Passage Rate:****Is this data from the State licensing agency that administered the exam?: yes****Name of Agency:****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:****Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

**Is this data from the licensing agency that administered the State exam?:** yes

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **SALARY DATA**

**Graduates Available for Employment:** 4

**Graduates Employed in the Field:** 4

**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:** 2

**\$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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012625632

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** N-CLEX-RN

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

**Total Charges for this program (Report whole dollars only):** \$ 2575

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:****Name of Exam:****Number of Graduates Taking State Exam:****Number Who Passed the State Exam:****Number Who Failed the State Exam:****Passage Rate:****Is this data from the State licensing agency that administered the exam?: no****Name of Agency:****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:****Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012625759

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Nelex VN

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

**Total Charges for this program (Report whole dollars only):** \$ 2200

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:****Name of Exam:****Number of Graduates Taking State Exam:****Number Who Passed the State Exam:****Number Who Failed the State Exam:****Passage Rate:****Is this data from the State licensing agency that administered the exam?: no****Name of Agency:****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:****Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012691855

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Pharmacy Technician

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

**Total Charges for this program (Report whole dollars only):** \$ 6600

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: yes****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field: Pharmacy Technician Certification Board (PTCB)****Name of Exam: N/A****Number of Graduates Taking State Exam: 0****Number Who Passed the State Exam: 0****Number Who Failed the State Exam: 0****Passage Rate: 0****Is this data from the State licensing agency that administered the exam?: no****Name of Agency: N/A****If the response to #29 was no, provide a description of the process used for attempting to contact students:**

No exam is required but a license is provided to qualified applicants by the Pharmacy Technician Certification Board (PTCB).

**Second Data Year 2015:**

**Name of the State licensing entity that licenses this field:** Pharmacy Technician Certification Board (PTCB)

**Name of State Exam:** N/A

**Number of Graduates Taking State Exam:** 0

**Number Who Passed the State Exam:** 0

**Number Who Failed the State Exam:** 0

**Passage Rate:** 0

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

**Name of Agency:** N/A

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

No exam is required but a license is provided to qualified applicants by the Pharmacy Technician Certification Board (PTCB).

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 20171201105353

**Report for Year:** 2016

**Institution Name:** L.A. VOCATIONAL INSTITUTE

**Institution Code:** 1939591

#### **INFORMATON 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.):** Phlebotomy Technician  
(Advanced)

**Number of Degrees or Diplomas Awarded:** 16

**Total Charges for this program (Report whole dollars only):** \$ 925

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**Number of Students Who Began the Program:** 19

**Students Available for Graduation:** 19

**On-time Graduates:** 16

**Completion Rate:** 84



**150% Completion Rate: 0**

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

no

## **PLACEMENT**

**Graduates Available for Employment: 16**

**Graduates Employed in the Field: 16**

**Placement Rate: 100**

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

**Graduates employed in the field at least 30 hours per week: 16**

**Indicate the number of graduates employed:**

**Single position in field: 16**

**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 shared ownership with the institution: 0**

## **EXAM PASSAGE RATE**

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

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

**First Data Year 2016:**

**Name of the State licensing entity that licenses this field: CALIFORNIA DEPARTMENT OF PUBLIC HEALTH**

**Name of Exam: CERTIFIED PHLEBOTOMY TECHNICIAN**

**Number of Graduates Taking State Exam: 16**

**Number Who Passed the State Exam: 16**

**Number Who Failed the State Exam: 0**

**Passage Rate: 100**

**Is this data from the State licensing agency that administered the exam?: yes**

**Name of Agency: NATIONAL HEALTH CAREER ASSOCIATION**

**If the response to #29 was no, provide a description of the process used for attempting to contact students:**

**Second Data Year 2015:**

**Name of the State licensing entity that licenses this field:** CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

**Name of State Exam:** CERTIFIED PHLEBOTOMY TECHNICIAN

**Number of Graduates Taking State Exam:** 5

**Number Who Passed the State Exam:** 5

**Number Who Failed the State Exam:** 0

**Passage Rate:** 100

**Is this data from the licensing agency that administered the State exam?:** yes

**Name of Agency:** NATIONAL HEALTH CAREER ASSOCIATION

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **SALARY DATA**

**Graduates Available for Employment:** 7

**Graduates Employed in the Field:** 7

**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:** 16

**\$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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012692303

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Phlebotomy National  
Exam Preparatory

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

**Total Charges for this program (Report whole dollars only):** \$ 450

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0**

#### **EXAM PASSAGE RATE**

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

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

**First Data Year 2016:**

**Name of the State licensing entity that licenses this field: Pharmacy Technician Certification Board (PTCB)**

**Name of Exam: N/A**

**Number of Graduates Taking State Exam: 0**

**Number Who Passed the State Exam: 0**

**Number Who Failed the State Exam: 0**

**Passage Rate: 0**

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

**Name of Agency: N/A**

**If the response to #29 was no, provide a description of the process used for attempting to contact students:**

No exam is required in CA but a license is provided to qualified applicants by the Pharmacy Technician Certification Board (PTCB).

**Second Data Year 2015:**

**Name of the State licensing entity that licenses this field:** Pharmacy Technician Certification Board (PTCB)

**Name of State Exam:** N/A

**Number of Graduates Taking State Exam:** 0

**Number Who Passed the State Exam:** 0

**Number Who Failed the State Exam:** 0

**Passage Rate:** 0

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

**Name of Agency:** N/A

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

No exam is required in CA but a license is provided to qualified applicants by the Pharmacy Technician Certification Board (PTCB).

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 20171201104551

**Report for Year:** 2016

**Institution Name:** L.A. VOCATIONAL INSTITUTE

**Institution Code:** 1939591

#### **INFORMATON 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.):** Phlebotomy Technician

**Number of Degrees or Diplomas Awarded:** 221

**Total Charges for this program (Report whole dollars only):** \$ 1675

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**Number of Students Who Began the Program:** 246

**Students Available for Graduation:** 246

**On-time Graduates:** 221

**Completion Rate:** 90

**150% Completion Rate:** 0



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

no

**PLACEMENT****Graduates Available for Employment: 221****Graduates Employed in the Field: 172****Placement Rate: 78****Graduates employed in the field 20 to 29 hours per week: 0****Graduates employed in the field at least 30 hours per week: 172****Indicate the number of graduates employed:****Single position in field: 172****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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: yes****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field: CALIFORNIA DEPARTMENT OF PUBLIC HEALTH****Name of Exam: CERTIFIED PHLEBOTOMY TECHNICIAN****Number of Graduates Taking State Exam: 172****Number Who Passed the State Exam: 172****Number Who Failed the State Exam: 0****Passage Rate: 100****Is this data from the State licensing agency that administered the exam?: yes****Name of Agency: NATIONAL HEALTH CAREER ASSOCIATION****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field: CALIFORNIA DEPARTMENT OF PUBLIC HEALTH**

**Name of State Exam:** CERTIFIED PHLEBOTOMY TECHNICIAN

**Number of Graduates Taking State Exam:** 151

**Number Who Passed the State Exam:** 151

**Number Who Failed the State Exam:** 0

**Passage Rate:** 100

**Is this data from the licensing agency that administered the State exam?:** yes

**Name of Agency:** NATIONAL HEALTH CAREER ASSOCIATION

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **SALARY DATA**

**Graduates Available for Employment:** 7

**Graduates Employed in the Field:** 7

**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:** 21

**\$25,001 - \$30,000:** 6

**\$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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 20171201113530

**Report for Year:** 2016

**Institution Name:** L.A. VOCATIONAL INSTITUTE

**Institution Code:** 1939591

#### **INFORMATON 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.):** Physical Therapy Aide

**Number of Degrees or Diplomas Awarded:** 7

**Total Charges for this program (Report whole dollars only):** \$ 2675

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**Number of Students Who Began the Program:** 9

**Students Available for Graduation:** 9

**On-time Graduates:** 7

**Completion Rate:** 78

**150% Completion Rate:** 0

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

no

**PLACEMENT****Graduates Available for Employment: 7****Graduates Employed in the Field: 7****Placement Rate: 100****Graduates employed in the field 20 to 29 hours per week: 0****Graduates employed in the field at least 30 hours per week: 7****Indicate the number of graduates employed:****Single position in field: 7****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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: no****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:****Name of Exam:****Number of Graduates Taking State Exam:****Number Who Passed the State Exam:****Number Who Failed the State Exam:****Passage Rate:****Is this data from the State licensing agency that administered the exam?: yes****Name of Agency:****If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:****Name of State Exam:**

**Number of Graduates Taking State Exam:**

**Number Who Passed the State Exam:**

**Number Who Failed the State Exam:**

**Passage Rate:**

**Is this data from the licensing agency that administered the State exam?:** yes

**Name of Agency:**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **SALARY DATA**

**Graduates Available for Employment:** 7

**Graduates Employed in the Field:** 7

**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:** 2

**\$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**



You can now [Print this page](#) for your records.

After printing, you can proceed to enter in additional [Programs](#) data OR  
you can begin to enter in [Branches](#) data

### **BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 2018012694207

**Report for Year:** 2016

**Institution Name:** L.A.Vocational Institute

**Institution Code:** 1939591

#### **INFORMATON 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.):** Psychiatric Technician

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

**Total Charges for this program (Report whole dollars only):** \$ 18575

**The percentage of enrolled students in 2016 receiving federal student loans to pay for this  
program.** 0

**The percentage of graduates in 2016 who took out federal student loans to pay for this  
program.** 0

**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 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 shared ownership with the institution: 0****EXAM PASSAGE RATE****Does this educational program lead to an occupation that requires State licensing?: yes****If Yes, please provide the information below (For each of the last two years):****First Data Year 2016:****Name of the State licensing entity that licenses this field:** Board of Vocational Nursing and Psychiatric Technicians**Name of Exam:** CAPT**Number of Graduates Taking State Exam: 0****Number Who Passed the State Exam: 0****Number Who Failed the State Exam: 0****Passage Rate: 0****Is this data from the State licensing agency that administered the exam?: yes****Name of Agency:** BVNPT**If the response to #29 was no, provide a description of the process used for attempting to contact students:****Second Data Year 2015:****Name of the State licensing entity that licenses this field:** Board of Vocational Nursing and Psychiatric Technicians

**Name of State Exam: CAPT**

**Number of Graduates Taking State Exam: 0**

**Number Who Passed the State Exam: 0**

**Number Who Failed the State Exam: 0**

**Passage Rate: 0**

**Is this data from the licensing agency that administered the State exam?: yes**

**Name of Agency: BVNPT**

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

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

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

**Name of Option/Requirement:**

**Name of Option/Requirement:**

**Name of Option/Requirement:**

#### **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**