



You can now Print this page for your records.

After printing, you can proceed to enter in your Program data

**BPPE Annual Report for 2015 - Institution**

**Tracking Number:** 20161114124445

**Report for Year:** 2015

**Institution Name:** Capstone College

**Institution Code (If an institution has branch locations the institution code is the school code for the main location):** 1916991

**Street Address (Physical Location):** 1200 N. Fair Oaks Ave. Suite 32

**City:** Pasadena

**State:** California

**Zip Code:** 91103

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

**For profit institution:** For profit institution

**Sole Proprietor:**

**Non-profit institution:**

**Limited Liability Corporation (LLC):** Limited Liability Corporation (LLC)

**Publicly traded institution:**

**Partnership:**

**Number of Branch Locations:** 0

**Number of Satellite Locations:** 0

**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: yes**

**If you answered yes to the question above, please identify the accrediting agency: Accrediting Council for Continuing Education and Training**

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

**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.: yes**

**Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act?: yes**

**What is the total amount of Title IV funds received by your institution in 2015?: 429518**

**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 2015?: 53786**

**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 2015?: 7754**

**Does your institution participate in, or offer any another government or non-governmental financial aid programs? yes**

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

**The percentage of institutional income in 2015 that was derived from public funding: 84**

**If your institution reports a Cohort Default Rate to the US Department of Education, enter the most recent three year cohort default rate reported to the U.S. Department of Education for this institution: 41**

**The percentage of students who in 2015 received federal student loans to help pay their cost of education at the school was: 75**

**Total number of students enrolled at this institution: 51**

**Number of Doctorate Degrees Offered: 0**

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

**Number of Master Degrees Offered: 0**

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

**Number of Bachelor Degrees Offered: 0**

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

**Number of Associate Degrees Offered: 0**

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

**Number of Diploma or Certificate Programs Offered: 3**

**Number of Students enrolled in Diploma or Certificate programs at this institution: 51**

**Institution's website:** [www.capstonecollege.edu](http://www.capstonecollege.edu)

**Performance Fact Sheet:** <http://capstonecollege.edu/consumer-information-and-disclosures/>

**2015 Catalog:** <http://capstonecollege.edu/consumer-information-and-disclosures/>

**Annual Report:** <http://capstonecollege.edu/consumer-information-and-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 2015 – Programs**

**Tracking Number:** 2016111410007

**Report for Year:** 2015

**Institution Code:** 1916991

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

**Degree/Program Level:** DiplomaCertificate

**If Other, please specify:**

**Degree/Program Title:** DiplomaCertificate

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

**Name of Program (e.g. Business Administration, Massage, etc.):** Chiropractic Assistant/Physical Therapy Aide

**Number of Degrees or Diplomas Awarded:** 3

**Total Charges for this program (Report whole dollars only):** \$ 12950

**Number of Students Who Began the Program:** 4

**Students Available for Graduation:** 4

**On-time Graduates:** 0

**Completion Rate:** 0

**150% Completion Rate:** 0

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

no

**PLACEMENT**

**Graduates Available for Employment: 0**

**Graduates Employed in the Field: 0**

**Placement Rate: 0**

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

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

**Indicate the number of graduates employed:**

**Single position in field:**

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

**Freelance/self-employed:**

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

**EXAM PASSAGE RATE**

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

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

**First Data Year (YYYY):**

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

**Name of Exam:**

**Number of Graduates Taking Exam:**

**Number Who Passed the Exam:**

**Number Who Failed the Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

**Second Data Year (YYYY):**

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

**Name of Exam:**

**Number of Graduates Taking Exam:**

**Number Who Passed the Exam:**

**Number Who Failed the Exam:**

**Passage Rate:**

**Is this data from the licensing agency that administered the 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 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 2015 – Programs

**Tracking Number:** 2016111410351

**Report for Year:** 2015

**Institution Code:** 1916991

#### 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:** 0

**Total Charges for this program (Report whole dollars only):** \$ 12950

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

**Students Available for Graduation:** 0

**On-time Graduates:** 0

**Completion Rate:** 0

**150% Completion Rate:** 0

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



**Department of Education?:**

no

**PLACEMENT**

**Graduates Available for Employment: 0**

**Graduates Employed in the Field: 0**

**Placement Rate: 0**

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

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

**Indicate the number of graduates employed:**

**Single position in field:**

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

**Freelance/self-employed:**

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

**EXAM PASSAGE RATE**

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

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

**First Data Year (YYYY):**

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

**Name of Exam:**

**Number of Graduates Taking Exam:**

**Number Who Passed the Exam:**

**Number Who Failed the Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

**Second Data Year (YYYY):**

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

**Name of Exam:**

**Number of Graduates Taking Exam:**

**Number Who Passed the Exam:**

**Number Who Failed the Exam:**

**Passage Rate:**

**Is this data from the licensing agency that administered the 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 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 2015 – Programs**

**Tracking Number:** 2016111411535

**Report for Year:** 2015

**Institution Code:** 1916991

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

**Degree/Program Level:** DiplomaCertificate

**If Other, please specify:**

**Degree/Program Title:** DiplomaCertificate

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

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

**Number of Degrees or Diplomas Awarded:** 39

**Total Charges for this program (Report whole dollars only):** \$ 14800

**Number of Students Who Began the Program:** 49

**Students Available for Graduation:** 49

**On-time Graduates:** 19

**Completion Rate:** 39

**150% Completion Rate:** 63

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

no

**PLACEMENT**

**Graduates Available for Employment: 19**

**Graduates Employed in the Field: 12**

**Placement Rate: 63**

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

**Graduates employed in the field at least 30 hours per week: 8**

**Indicate the number of graduates employed:**

**Single position in field:**

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

**Freelance/self-employed:**

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

**EXAM PASSAGE RATE**

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

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

**First Data Year (YYYY):**

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

**Name of Exam:**

**Number of Graduates Taking Exam:**

**Number Who Passed the Exam:**

**Number Who Failed the Exam:**

**Passage Rate:**

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

**Name of Agency:**

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

**Second Data Year (YYYY):**

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

**Name of Exam:**

**Number of Graduates Taking Exam:**

**Number Who Passed the Exam:**

**Number Who Failed the Exam:**

**Passage Rate:**

**Is this data from the licensing agency that administered the 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 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: 19**

**Graduates Employed in the Field: 12**

**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: 1**

**\$15,001 - \$20,000: 0**

**\$20,001 - \$25,000: 3**

**\$25,001 - \$30,000: 2**  
**\$30,001 - \$35,000: 0**  
**\$35,001 - \$40,000: 0**  
**\$40,001 - \$45,000: 2**  
**\$45,001 - \$50,000: 2**  
**\$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**