



Department of Consumer Affairs

Bureau for Private Postsecondary Education

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BPPE Annual Report for 2015 - Institution

Tracking Number: 2016112912224

Report for Year: 2015

Institution Name: California Health Sciences University

Institution Code (If an institution has branch locations the institution code is the school code for the main location): 40231830

Street Address (Physical Location): 120 N. Clovis Ave

City: Clovis

State: California

Zip Code: 93612

Check all that apply to this 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: 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:

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 2015?:

Does your institution participate in veteran's financial aid education programs?: no

What is the total amount of veteran's financial aid funds received by your institution in 2015?:

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?:

Is your institution on the California Eligible Training Provider List (ETPL)?: no

Is your institution receiving funds from the Work Innovation and Opportunity Act (WIOA) Program?: no

What is the total amount of WIOA funds received by your institution in 2015?:

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: Sallie Mae Private Lending, iHelp

The percentage of institutional income in 2015 that was derived from public funding: 0

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: 0

The percentage of students who in 2015 received federal student loans to help pay their cost of education at the school was: 0

Total number of students enrolled at this institution: 172

Number of Doctorate Degrees Offered: 1

Number of Students enrolled in Doctorate level programs at this Institution: 172

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: 0

Number of Students enrolled in Diploma or Certificate programs at this institution: 0

Institution's website: <http://chsu.org/>

Performance Fact Sheet: <http://chsu.org/performance-fact-sheet/>

2015 Catalog: <http://chsu.org/2015-2016-general-catalog/>

Annual Report: <http://chsu.org/chsu-annual-report/>

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you can begin to enter in [Branches](#) data

BPPE Annual Report for 2015 – Programs

Tracking Number: 2016112912844

Report for Year: 2015

Institution Code: 40231830

INFORMATION FOR EACH EDUCATIONAL PROGRAM OFFERED AT THE INSTITUTION

Degree/Program Level: Doctorate

If Other, please specify:

Degree/Program Title: OtherDoctorate

If Other Doctorate, Other Master, Other Bachelor, Other Associate or Other was chosen, please specify: Doctor of Pharmacy

Name of Program (e.g. Business Administration, Massage, etc.): Pharm D

Number of Degrees or Diplomas Awarded: 0

Total Charges for this program (Report whole dollars only): \$ 171595

Number of Students Who Began the Program: 132

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?: yes****If Yes, please provide the information below (For each of the last two years):****First Data Year (YYYY): 2014****Name of the licensing entity that licenses this field: National Association of Boards of Pharmacay****Name of Exam: NAPLEX****Number of Graduates Taking Exam: 0****Number Who Passed the Exam: 0****Number Who Failed the Exam: 0****Passage Rate: 0****Is this data from the licensing agency that administered the exam?: no****Name of Agency:****If the response to #28 was no, provide a description of the process used for attempting to contact students:****Unavailable****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: CHSU - McKenna Walker

Name of Option/Requirement: CHSU - McKenna Walker

Name of Option/Requirement: CHSU - McKenna Walker

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



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if you are finished, please fill out and print the [Annual Report Completion Check Sheet](#) (which
must be mailed in to the Bureau).

BPPE Annual Report for 2015 – Branch Locations

Tracking Number: 2016112913022

Report for Year: 2015

Institution Name: California Health Sciences University

Institution Code: 40231830

Branch Address: NA

Branch City: NA

Branch State: California

Branch Zip Code: 93612