Bureau for Private Postsecondary Education
Department of Consumer Affairs

2024 Annual Report

Institution Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Institution - General Info

Annual Report data is institutional data that is combined for the main location, branch and all satellite locations.

1. Report Year *

2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

89727389

3. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

Prestige Career College

4. Street Address (Physical Location) *

6606 Pacific Blvd Suite 204

5. City *

Huntington Park

6. State *

CA

7. Zip Code *

90255

8. Select the type of business organization for this institution *

For profit corporation

9. Number of Branch Locations *

Indicate the number of branch locations associated with the main location. If none, enter zero ("0")

2

10. Number of Satellite Locations *

Indicate the number of branch locations associated with the main location or branch location. If none, enter zero ("0")

0

Graduate Identification Data

2024 BPPE Annual Report - Institution - Graduate Identification Data

New Reporting Requirement: California Education Code section 94892.6 requires that institutions approved to operate by the Bureau collect, retain, and report specified information about each graduate completing a program on or after January 1, 2020. This includes identifying information for each graduate along with information about the program from which they graduated and the amount of student loan debt borrowed. Pursuant to Title 5, California Code of Regulations section 74110, beginning in 2022 institutions will report this information to the Bureau annually through the Annual Report submission process.

The AR_LaborMarketData_2024 reporting template linked below includes details about the data required to be reported for each student who graduated from the institution's education program(s) between January 1, 2024 and December 31, 2024. Click on the link to the template and save to your computer to fill out. After adding the required information to the "Data" tab, press the "Select files" button at the bottom of the portal Graduate Identification Data page to upload and attach your completed AR_LaborMarketData_2024 report to the institution's Annual Report submission. Uploaded files must be in Excel or CSV formats.

Please contact Jennifer Jones (Jennifer.jones@dca.ca.gov) with questions about this requirement.

AR_LaborMarketData_2024.xlsx

Upload completed Excel or CSV here *

AR_LaborMarketData_2024.xlsx

Fees / Accreditation

2024 BPPE Annual Report - Institution - Fees/Accreditation

Display Instructions for #11 - #14 (Toggle)
Not Checked
11a. Is this institution current with all assessments to the Student Tuition Recovery Fund? *

Yes
11b. Is this institution current on Annual Fees? *

Yes
12. Is your institution accredited by an accrediting agency/agencies recognized by the United States Department of Education? *

No
13. If your institution has specialized accreditation from a recognized United States Department of Education approved specialized/programmatic accreditor, list the accreditation below.

14. Has any accreditation agency taken any final disciplinary action against this institution in the reporting year? Indicate "yes" if the institution has had final disciplinary action taken against it by an accreditation agency; Indicate "no" if no final action has been taken against the institution by an accreditation agency. If Yes, please upload a copy of the action at #14a. *

No

Financial

2024 BPPE Annual Report - Institution - Financial

For the questions below, please disclose any funds received by the institution from the federal and/or state government to provide services to the general public.

Display Instructions for #15 - #26 (Toggle)

Not Checked

15. Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act? (This includes federal loans and grants) *

No

16. Does your institution participate in veterans' financial aid education programs? *

No

17. Does your institution participate in the Cal Grant program? *

No

18. Is your institution on California`s Eligible Training Provider List (ETPL)? *

Yes

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

Yes

19a. What is the total amount of WIOA funds received by your institution in this Reporting Year? *

$2,327,500.00

20. Does your Institution participate in, or offer, any other state or federal government financial aid programs? (i.e., vocational rehab…) *

No

21. Provide the percentage of institutional income during this Reporting Year derived from public funding. *

If none, indicate "0".

97

22. Does your Institution participate in, or offer any non-government financial aid programs? (i.e., private grants/loans, institutional grants/loans) *

Yes

22a. You indicated "Yes" for #22, please provide the name of the financial aid programs below.

Employer Tuition Sponsored Program, Miguel Contreras Foundation

23. The percentage of institutional income in the reporting year derived from any non-government financial aid. *

18

24. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable. *

If Not Applicable, indicate "0".

0

25. Provide the percentage of the students who attended this institution during this Reporting Year who received federal student loans to help pay their cost of education at the school. *

If none, indicate "0".

0

26. Provide the average amount of federal student loan debt of graduates who took out federal student loans at this institution. *

Offerings

2024 BPPE Annual Report - Institution - Offerings

Display Instructions for #27 - #37 (Toggle)
Checked

Instructions

[(Printer Friendly Annual Report Instructions Document)](#)

27. Total number of students enrolled at this institution in the reporting year. Indicate the number of students attending and/or enrolled in all programs at your institution (minus the number of students in the reporting year who cancelled during the cancellation period) January 1st through December 31st.

28. Number of Doctorate Degree Programs Offered? Indicate the number of Doctorate degree Programs the institution offered for the reporting year. (Number of Programs not Students)

29. Number of Students enrolled in Doctorate programs at this institution? Indicate the number of students enrolled and/or active in all Doctorate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

30. Number of Master Degree Programs Offered? Indicate the number of Master degree Programs the institution offered for the reporting year. (Number of Programs not Students)

31. Number of Students enrolled in Master programs at this institution? Indicate the number of students enrolled and/or active in all Master programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

32. Number of Bachelor Degree Programs Offered? Indicate the number of Bachelor degree Programs the institution offered for the reporting year. (Number of Programs not Students)

33. Number of Students enrolled in Bachelor programs at this institution? Indicate the number of students enrolled and/or active in all Bachelor programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

34. Number of Associate Degree Programs Offered? Indicate the number of Associate degree Programs offered for the reporting year. (Number of Programs not Students)

35. Number of Students enrolled in Associate programs at this institution? Indicate the number of students enrolled and/or active in all Associate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

36. Number of Diploma or Certificate Programs Offered? Indicate the number of Diploma or Certificate Programs offered for the reporting year. (Number of Programs not Students)

37. Number of Students enrolled in diploma or certificate programs at this institution? Indicate the number of students enrolled and/or active in all diploma/certificate programs at your institution in the

reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.

---

27. Total number of students enrolled at this institution in the reporting year. Indicate the number of students attending and/or enrolled in all programs at your institution (minus the number of students in the reporting year who cancelled during the cancellation period) January 1st through December 31st . *
If none, indicate "0".

913

28. Number of Doctorate Degree Programs Offered? Indicate the number of Doctorate degree Programs the institution offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

29. Number of Students enrolled in Doctorate programs at this institution? Indicate the number of students enrolled and/or active in all Doctorate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

30. Number of Master Degree Programs Offered? Indicate the number of Master degree Programs the institution offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

31. Number of Students enrolled in Master programs at this institution? Indicate the number of students enrolled and/or active in all Master programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

32. Number of Bachelor Degree Programs Offered? Indicate the number of Bachelor degree Programs the institution offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

33. Number of Students enrolled in Bachelor programs at this institution? Indicate the number of students enrolled and/or active in all Bachelor programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

34. Number of Associate Degree Programs Offered? Indicate the number of Associate degree Programs offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

35. Number of Students enrolled in Associate programs at this institution? Indicate the number of students enrolled and/or active in all Associate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

36. Number of Diploma or Certificate Programs Offered? Indicate the number of Diploma or Certificate Programs offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

6

37. Number of Students enrolled in diploma or certificate programs at this institution? Indicate the number of students enrolled and/or active in all diploma/certificate programs at your institution in the reporting

year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

913
Total Program Count

6

Website / Uploads

2024 BPPE Annual Report - Institution - Website and Required Uploads

An institution that maintains a website, shall provide on the homepage of that website, clear and conspicuous links to the most recent Annual Report submitted to the Bureau, the Catalog, and School Performance Fact Sheet (CEC §94913).**

**The Bureau recommends a portion of the school's website dedicated to providing students with the required information below.

Uploads for Documents must be in PDF format. Other formatting may be too large to upload and will be rejected by BPPE staff.

Institution's Website

https://www.prestigecareercollege.com/
38. Upload School Performance Fact Sheet *
Required file format = PDF

39. Upload Catalog *
Required file format = PDF

40. Upload Enrollment Agreement *
Required file format = PDF

The file upload facility below (#41) is ONLY for use when BPPE requests additional supporting documentation. The inital submission of the Annual Report does not require any action below.

41. General File Upload (only use as directed by BPPE staff)
Recommended file format = PDF

Pursuant to 5 CCR § 74110 (f)(6), **financial statements are required to be submitted via mail in hard copy format to the Bureau and attention to the Annual Report Unit**; however, the institution may in addition upload an electronic version. This is optional.

42. Upload Financial Statements
Recommended file format = PDF

Bureau for Private Postsecondary Education
Department of Consumer Affairs

2024 Annual Report

Branch Location Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Branch Location Data

1. Report Year *

2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #4.

89727389

3. School Code *

Enter school code (branch location)

46614974

4. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

Prestige Career College

Branch Data (California locations only)

5. Total number of students at this branch location? *

Enter "0" if none.

111

6. Name of Programs offered at this branch location? *

Separate each program name with a comma or enter `None"

Nurse Assistant (Direct and Hybrid), Diagnostic Medical Sonography (Hybrid), Medical Assistant (Hybrid), Sterile Processing Technician (Hybrid)

7. Street Address (physical location) *

1460 E Holt Ave Suite 112

8. City *

Pomona

9. State *

CA

10. Zip Code *

91767

Bureau for Private Postsecondary Education
Department of Consumer Affairs

2024 Annual Report

Branch Location Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Branch Location Data

1. Report Year *

2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #4.

89727389

3. School Code *

Enter school code (branch location)

34070877

4. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

Prestige Career College

Branch Data (California locations only)

5. Total number of students at this branch location? *

Enter "0" if none.

135

6. Name of Programs offered at this branch location? *

Separate each program name with a comma or enter `None"

Nurse Assistant (Direct and Hybrid), Diagnostic Medical Sonography (Hybrid), Medical Assistant (Hybrid), Sterile Processing Technician (Hybrid)

7. Street Address (physical location) *

16525 Sherman Way Unit C-7

8. City *

Van Nuys

9. State *

CA

10. Zip Code *

91406

Institution Information

Bureau for Private Postsecondary Education
Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

89727389

3. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

Prestige Career College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Central Service Technician (Hybird)

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

0

9. Total Charges for this Program *

$7,500.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

0

13. Number of Students Available for Graduation *
If none, indicate "0".

0

14. Number of On-time Graduates *
If none, indicate "0".

0

15. Completion Rate
This is a calculated field based on #14 and #13.

16. 150% Graduates?

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

19. Graduates Available for Employment *
If none, indicate "0".

0

20. Graduates Employed in the Field *
If none, indicate "0".

0

21. Placement Rate
This is a calculated field based on #17 and #18.

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".

0

22b. at least 30 hours per week *
If none, indicate "0".

0

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".

0

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)
*
If none, indicate "0".

0

23c. Freelance/self-employed *
If none, indicate "0".

0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".

0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked
24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *

No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked
26. Does this educational program lead to an occupation that requires State licensing? *

No
You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked
43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.

0

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.

0

45. Graduates Employed in the Field Reported receiving the following Salary or Wage:

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

$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

Institution Information

2024 Annual Report

Program Data Workflow

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

89727389

3. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

Prestige Career College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

Diagnostic Medical Sonography (Hybrid)

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.0910 - Diagnostic Medical Sonography/Sonographer and Ultrasound Technician.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

29-2032 - Diagnostic Medical Sonographers

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Checked

Instructions

(Printer Friendly Annual Report Instructions Document)

8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year? "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

9. Total Charges for this program? Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are are required for participation in the educational program.

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program. Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program. Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

12. Number of Students Who Began the Program? Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

13. Students Available for Graduation? Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

14. On-Time Completion? Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

15. Completion Rate? Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

16. 150% Graduates? Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(I)).

17. 150% Completion Rate? If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(I)).

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

---

8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

0

9. Total Charges for this Program *

$17,000.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

0

13. Number of Students Available for Graduation *
If none, indicate "0".

0

14. Number of On-time Graduates *
If none, indicate "0".

0

15. Completion Rate
This is a calculated field based on #14 and #13.

16. 150% Graduates?

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".

0

20. Graduates Employed in the Field *
If none, indicate "0".

0

21. Placement Rate
This is a calculated field based on #17 and #18.

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".

0

22b. at least 30 hours per week *
If none, indicate "0".

0

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".

0

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".

0

23c. Freelance/self-employed *
If none, indicate "0".

0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".

0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked
24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *

No

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked
26. Does this educational program lead to an occupation that requires State licensing? *

No
You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked
43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.

0
44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.

0
45. Graduates Employed in the Field Reported receiving the following Salary or Wage:

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

$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

Institution Information

Bureau for Private Postsecondary Education
Department of Consumer Affairs

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

89727389

3. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

Prestige Career College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)

Not Checked

4. Name of Program *

Home Health Aide

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.2602 - Home Health Aide/Home Attendant.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

31-1121 - Home Health Aides

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked
8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

0

9. Total Charges for this Program *

$677.50

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

0

13. Number of Students Available for Graduation *
If none, indicate "0".

0

14. Number of On-time Graduates *
If none, indicate "0".

0

15. Completion Rate
This is a calculated field based on #14 and #13.

16. 150% Graduates?

0

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Not Checked

19. Graduates Available for Employment *
If none, indicate "0".

0

20. Graduates Employed in the Field *
If none, indicate "0".

0

21. Placement Rate
This is a calculated field based on #17 and #18.

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".

0

22b. at least 30 hours per week *
If none, indicate "0".

0

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".

0

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time)
*
If none, indicate "0".

0

23c. Freelance/self-employed *
If none, indicate "0".

0

23d. By the institution or an employer owned by the institution, or an employer who shares
ownership with the institution *
If none, indicate "0".

0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied
health professionals that requires clinical training? *

Yes

24a. Select the Allied Health Professions requiring clinical training.

24b. Enter the name(s) of clinical site(s). Enter the License number or Employer Identification number, program name, total number of students and the number of students proficient in languages other than English.

Site Name	License or FIEN #	Program Name	Total Number of Students	Number of Students Proficient in Languages Other than English

25. For each clinical site, indicate whether any donation, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed.

Site Name	Donation or Compensation Amount	Type of Consideration

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked
26. Does this educational program lead to an occupation that requires State licensing? *

No
You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked
43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.

0

44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.

0

45. Graduates Employed in the Field Reported receiving the following Salary or Wage:

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

$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

Institution Information

2024 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

   2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

   89727389

3. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

   Prestige Career College

Program Name

2024 BPPE Annual Report - Program - Program Name

Display Instructions for #4 - #7 (Toggle)
Not Checked

4. Name of Program *

   Medical Assistant (Hybrid)

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

   Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

51.0801 - Medical/Clinical Assistant.

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

31-9092 - Medical Assistants

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Checked

Instructions

(Printer Friendly Annual Report Instructions Document)

8. Number of Degrees, Diplomas or Certificates Awarded to graduates scheduled to complete in the reporting year? "Number of Graduates" refers to the number of graduates in the reporting calendar year, who were scheduled to complete in said reporting calendar year. This is on-time grads, 150% grads and anyone else who was "scheduled to complete" in the calendar year.

9. Total Charges for this program? Indicate the total charges, in the reporting year, for the student to complete the program within 100% of the program length. If the total charges fluctuated during the reporting year, indicate the highest amount charged for this program during the reporting year. Total charges include all amounts paid for the program, including books, uniforms and other charges, if the charges are are required for participation in the educational program.

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program. Indicate the percentage of students enrolled in this program who received federal student loans to pay for this program. Divide the total number of students enrolled in this program, who received federal student loans to pay for this program, by the total number of students enrolled in this program.

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program. Indicate the percentage of graduates from this program, who received federal student loans to pay for this program. Divide the total number of graduates, who in the reporting year, took out federal student loans to pay for this program, by the total number graduates from this program in the reporting year.

12. Number of Students Who Began the Program? Indicate the number of students who were scheduled to complete the program in the reporting year, exclude all students who cancelled during the cancellation period, 5 CCR §74112(d)(1). Institutions with Bureau approved branches and/or satellites locations must combine the total number of students enrolled in all locations.

13. Students Available for Graduation? Indicate the number of students available for graduation in the reporting year for the program being reported. This number should be the number of students who began the program (#12 above) minus the number of students who have died, been incarcerated or been called to active military duty (CEC §94928(f) & (g)).

14. On-Time Completion? Of the students available for graduation (#13 above), indicate the number of students who completed the program within 100% of the published length in the reporting year being reported (5 CCR §74112(d)(2)).

15. Completion Rate? Divide the number of On-Time Graduates (#14 above) by the number of Students Available for Graduation (#13 above).

16. 150% Graduates? Of the students available for graduation (#13 above), provide the number of students who completed the program within 150% of the published program length in the calendar year, this includes "On-Time Graduates" (5 CCR §74112(h)(I)).

17. 150% Completion Rate? If the institution tracks 150% completion rate, provide the number of students who completed the program in the reported calendar year within 150% of the published program length, including on-time graduates (#16 above), divided by the number of students available for graduation (#13 above). **A "rate" is a percentage and should never be more than 100%** (5 CCR §74112(h)(I)).

18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? Indicate "yes" if the information was taken from the data that was reported to IPEDS; Indicate "no" if it was not. If this institution does not participate in Title IV financial aid programs it most likely does not report to IPEDS.

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8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

11

9. Total Charges for this Program *

$7,500.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

13

13. Number of Students Available for Graduation *
If none, indicate "0".

11

14. Number of On-time Graduates *
If none, indicate "0".

11

15. Completion Rate
This is a calculated field based on #14 and #13.

100

16. 150% Graduates?

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

0

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)
Not Checked

19. Graduates Available for Employment *
If none, indicate "0".

10

20. Graduates Employed in the Field *
If none, indicate "0".

8

21. Placement Rate
This is a calculated field based on #17 and #18.

80

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22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".

0

22b. at least 30 hours per week *
If none, indicate "0".

8

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".

1

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".

0

23c. Freelance/self-employed *
If none, indicate "0".

0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".

0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *

Yes

24a. Select the Allied Health Professions requiring clinical training.

Medical Assistant

24b. Enter the name(s) of clinical site(s). Enter the License number or Employer Identification number, program name, total number of students and the number of students proficient in languages other than English.

Site Name	License or FIEN #	Program Name	Total Number of Students	Number of Students Proficient in Languages Other than English
Century Women Medical Group	1093834533	Medical Assistant	1	
FPA Women's Health	1982798831	Medical Assistant	2	
Long Beach Medical Weight Control		Medical Assistant	1	
Los Angeles Center for Ear, Nose, Throat and Allergy (LA CENTA)	1992124978	Medical Assistant	1	
St. John's Community Health	306190745	Medical Assistant	4	
Urgent Care Pros		Medical Assistant	1	
White Memorial Medical Group	930000195	Medical Assistant	1	

25. For each clinical site, indicate whether any donation, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed.

Site Name	Donation or Compensation Amount	Type of Consideration

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked

26. Does this educational program lead to an occupation that requires State licensing? *

No

You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)

Not Checked

43. Graduates Available for Employment

This field is auto-populated based on your entry in #17.

10

44. Graduates Employed in the Field

This field is auto-populated based on your entry in #18.

8

45. Graduates Employed in the Field Reported receiving the following Salary or Wage:

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

$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 *

1

$35,001 - $40,000 *

4

$40,001 - $45,000 *

3

$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

Institution Information

2024 Annual Report

Program Data Workflow

2024 BPPE Annual Report - Program - Institution Data

Complete one Program Data Workflow for EACH educational program offered (advertised) by the institution in the reporting year. If an institution offers the same program at the main location and a branch location, combine the data together and submit oneProgram Data Workflow for the program being reported.

1. Report Year *

 2024

2. Institution Code *

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

 89727389

3. Institution Name (auto-populated) *

If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

 Prestige Career College

Program Name

2024 BPPE Annual Report - Program - Program Name

 Display Instructions for #4 - #7 (Toggle)
 Not Checked

4. Name of Program *

 Sterile Processing Technician (Hybrid)

5. Program Level? Indicate the academic level of the program you are entering, (e.g., Doctorate, Masters, Bachelor, Associate, Diploma/Certificate, Other). If you indicate 'Other', please enter the Program Level in #5a. *

 Diploma/Certificate

6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program. Select from the dropdown list the code that most accurately corresponds to the educational program. (Optional)

7. Select all Standard Occupational Classification (SOC) Codes that apply to this program. Select all applicable codes from the dropdown list. (Optional)

31-9093 - Medical Equipment Preparers

Financial and Graduation

2024 BPPE Annual Report - Program - Financial Data and Graduation Rates

Display Instructions for #8 - #18 (Toggle)
Not Checked
8. Number of Degrees, Diplomas or Certificates Awarded *
If none, indicate "0".

8

9. Total Charges for this Program *

$7,500.00

10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for this program *

0

11. The percentage of graduates in the reporting year who took out federal student loans to pay for this program *

0

12. Number of Students Who Began the Program *
If none, indicate "0".

11

13. Number of Students Available for Graduation *
If none, indicate "0".

8

14. Number of On-time Graduates *
If none, indicate "0".

8

15. Completion Rate
This is a calculated field based on #14 and #13.

100

16. 150% Graduates?

17. 150% Completion Rate
This is a calculated field based on #16 and #13.

0

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

No

Placement Data

2024 BPPE Annual Report - Program - Placement Data

Display Instructions for #19 - #23 (Toggle)

Not Checked

19. Graduates Available for Employment *
If none, indicate "0".

8

20. Graduates Employed in the Field *
If none, indicate "0".

21. Placement Rate
This is a calculated field based on #17 and #18.

0

---

22. Graduates employed in the field...

22a. 20 to 29 hours per week *
If none, indicate "0".

0

22b. at least 30 hours per week *
If none, indicate "0".

4

---

23. Indicate the number of graduates employed...

23a. In a single position in the field of study *
If none, indicate "0".

4

23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) *
If none, indicate "0".

0

23c. Freelance/self-employed *
If none, indicate "0".

0

23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution *
If none, indicate "0".

0

Allied Health

2024 BPPE Annual Report - Program - Allied Health Professionals

Display Instructions for #24-25 (Toggle)
Not Checked

24. Does this "Program" lead to a certificate or degree related to one or more of the following allied health professionals that requires clinical training? *

Yes

24a. Select the Allied Health Professions requiring clinical training.

24b. Enter the name(s) of clinical site(s). Enter the License number or Employer Identification number, program name, total number of students and the number of students proficient in languages other than English.

Site Name	License or FIEN #	Program Name	Total Number of Students	Number of Students Proficient in Languages Other than English
Harbor-UCLA Medical Center	930000189	Sterile Processing Technician	4	
Martin Luther King, Jr. Ambulatory Care Center	306198064	Sterile Processing Technician	5	
Olive View–UCLA Medical Center	1508924945	Sterile Processing Technician	1	
Rancho Los Amigos National Rehabilitation Center	106191306	Sterile Processing Technician	1	

25. For each clinical site, indicate whether any donation, money, compensation, or exchange of any consideration was offered or provided by the institution to the business, nonprofit, or other organization, clinic, hospital, or other location where the student was placed.

Site Name	Donation or Compensation Amount	Type of Consideration

Exam Passage Rate

2024 BPPE Annual Report - Program - Exam Passage Rate

Display Instructions for #26 (Toggle)
Not Checked
26. Does this educational program lead to an occupation that requires State licensing? *

No
You have indicated "No" for question #22, please proceed to 'Salary Data'.

Salary Data

2024 BPPE Annual Report - Program - Salary Data

Display Instructions for #43-45 (Toggle)
Not Checked
43. Graduates Available for Employment
This field is auto-populated based on your entry in #17.

8
44. Graduates Employed in the Field
This field is auto-populated based on your entry in #18.

0

45. Graduates Employed in the Field Reported receiving the following Salary or Wage:

For graduates employed in the field, indicate their salaries/earnings below. **If there are none in any specific range, indicate "0."**

$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 *

1

$50,001 - $55,000 *

3

$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