



**BPPE Annual Report for 2016 - Institution**

**Tracking Number:** 20171130121629

**Report for Year:** 2016

**Institution Name:** Phlebotomy Training Specialists California, LLC

**Institution Code (If an institution has branch locations the institution code is the school code for the main location):** 22574123

**Street Address (Physical Location):** 14258 Beach Blvd.

**City:** Westminster

**State:** California

**Zip Code:** 92683

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

**For profit institution:**

**Sole Proprietor:**

**Corporation:**

**Non-profit institution:**

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

**Publicly traded institution:**

**Partnership:**

**Number of Branch Locations:** 0

**Number of Satellite Locations:** 1

**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?:**

**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 2016?:**

**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)?:** yes

**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 2016?:**

**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:** 0

**Enter the most recent three-year Cohort Default Rate reported by the US Department of Education, for this institution:** 0

**The percentage of students who in 2016 received federal student loans to help pay their cost of education at the school was:** 0

**Total number of students enrolled at this institution:** 777

**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: 1**

**Number of Students enrolled in Diploma or Certificate programs at this institution: 777**

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

**Performance Fact Sheet:** <https://www.phlebotomyusa.com/cainfo/>

**2016 Catalog:** <https://www.phlebotomyusa.com/cainfo/>

**Annual Report:** <https://www.phlebotomyusa.com/cainfo/>



**BPPE Annual Report for 2016 – Programs**

**Tracking Number:** 20171130105906

**Report for Year:** 2016

**Institution Name:** Phlebotomy Training Specialists California, LLC

**Institution Code:** 22574123

**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.):** CPT1

**Number of Degrees or Diplomas Awarded:** 742

**Total Charges for this program (Report whole dollars only):** \$ 1595

**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:** 777

**Students Available for Graduation:** 742

**On-time Graduates:** 696

**Completion Rate:** 94

**150% Completion Rate:** 46

**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: 610**

**Graduates Employed in the Field: 358**

**Placement Rate: 59**

**Graduates employed in the field 20 to 29 hours per week: 134**

**Graduates employed in the field at least 30 hours per week: 224**

**Indicate the number of graduates employed:**

**Single position in field: 291**

**Concurrent aggregated positions in field (2 or more positions at the same time): 28**

**Freelance/self-employed: 39**

**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: LFS**

**Name of Exam: CPT1**

**Number of Graduates Taking State Exam: 496**

**Number Who Passed the State Exam: 459**

**Number Who Failed the State Exam: 37**

**Passage Rate: 93**

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

**Name of Agency: NHA-National Healthcareer 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: LFS**

**Name of State Exam: CPT1**

**Number of Graduates Taking State Exam: 390**

**Number Who Passed the State Exam: 359**

**Number Who Failed the State Exam: 31**

**Passage Rate: 92**

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

**Name of Agency: NCCT/NHA**

**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: Monica Sanborn**

**Name of Option/Requirement: Monica Sanborn**

**Name of Option/Requirement: Monica Sanborn**

#### **SALARY DATA**

**Graduates Available for Employment: 610**

**Graduates Employed in the Field: 358**

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

**\$0 - \$5,000: 0**

**\$5,001 - \$10,000: 1**

**\$10,001 - \$15,000: 2**

**\$15,001 - \$20,000: 1**

**\$20,001 - \$25,000: 4**

**\$25,001 - \$30,000: 14**

**\$30,001 - \$35,000: 38**

**\$35,001 - \$40,000: 26**

**\$40,001 - \$45,000: 28**

**\$45,001 - \$50,000: 89**

**\$50,001 - \$55,000: 58**

**\$55,001 - \$60,000: 18**

**\$60,001 - \$65,000: 14**

**\$65,001 - \$70,000: 6**

**\$70,001 - \$75,000: 1**

**\$75,001 - \$80,000: 1**

**\$80,001 - \$85,000: 1**

**\$85,001 - \$90,000: 0**

**\$90,001 - \$95,000: 0**

**\$95,001 - \$100,000: 0**

**Over \$100,000: 0**



Department of Consumer Affairs

## Bureau for Private Postsecondary Education

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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 2016 – Satellite Locations**

**Tracking Number:** 20171130110223

**Report for Year:** 2016

**Institution Name:** Phlebotomy Training Specialists

**Institution Code:** 22574123

**Satellite Address:** 14418 Chase St. #205

**Satellite City:** Panorama City

**Satellite State:** California

**Satellite Zip Code:** 94142



Department of Consumer Affairs

## Bureau for Private Postsecondary Education

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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 2016 – Branch Locations**

**Tracking Number:** 20171130110140

**Report for Year:** 2016

**Institution Name:** Phlebotomy Training Specialists

**Institution Code:** 22574123

**Total number of students at this branch location?** N/A

**Name of programs offered at this branch locations?** N/A

**Branch Address:** N/A

**Branch City:** N/A

**Branch State:** California

**Branch Zip Code:** 00000