Part A - Educational Offerings

1. Which of the following types of instruction/programs are offered by your institution? [Check one or more]

If your institution does not offer occupational, academic or continuing professional programs, you are not expected to complete this or any other IPEDS survey.

- Occupational, may lead to a certificate, degree, or other formal award
- Academic, leading to a certificate, degree, or diploma
- Recreational or avocational (leisure) programs
- Adult basic or remedial instruction or high school equivalency
- Secondary (high school)
Part A - Educational Offerings

2. Please enter your institution's mission statement or a web address (URL) where your mission statement can be found. Mission statements provided manually must be limited to 1,000 characters or less. If your mission statement is lengthy but available electronically, please provide the web address in the space provided. The mission statement will be available to the public on the College Opportunities On-Line (IPEDS COOL) website.

Mission Statement URL: http://

Mission Statement
1. What is your institutional control or affiliation?  
- Public - Specify  
  Primary control  Secondary control (if applicable)  
  City No selection  
- Private for-profit  
- Private not-for-profit independent (no religious affiliation)  
- Private not-for-profit religious affiliation - Specify  
  No selection  

2. What award levels are offered by your institution? (One academic year equals 30 semester credit hours or its equivalent, or 900 contact or clock hours.) [Check all that apply]

<table>
<thead>
<tr>
<th>Award Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>BELOW THE BACCALAUREATE:</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>□ Postsecondary award, certificate, or diploma of less than one academic year (less than 900 contact or clock hours)</td>
</tr>
<tr>
<td>2</td>
<td>□ Postsecondary award, certificate, or diploma of at least one but less than two academic years (at least 900 but less than 1800 contact or clock hours)</td>
</tr>
<tr>
<td>3</td>
<td>□ Associate's degree</td>
</tr>
<tr>
<td>4</td>
<td>□ Postsecondary award, certificate, or diploma of at least two but less than four academic years (at least 1800 contact or clock hours)</td>
</tr>
<tr>
<td>BACCALAUREATE AND ABOVE:</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>□ Bachelor's degree or equivalent</td>
</tr>
<tr>
<td>6</td>
<td>□ Postbaccalaureate certificate</td>
</tr>
<tr>
<td>7</td>
<td>□ Master's degree</td>
</tr>
<tr>
<td>8</td>
<td>□ Post-master's certificate</td>
</tr>
<tr>
<td>9</td>
<td>□ Doctor's degree</td>
</tr>
<tr>
<td>10</td>
<td>□ First-professional degree</td>
</tr>
<tr>
<td>11</td>
<td>□ First-professional certificate (Post-degree)</td>
</tr>
<tr>
<td>12</td>
<td>□ Other; please specify in the Caveats box</td>
</tr>
</tbody>
</table>

CAVEATS
Part B - Organization and Accreditation

3. Does this institution offer any formally organized programs (either academic or occupational) with well defined completion requirements that do not lead to a formal award?
   ☐ No
   ☐ Yes - Specify
     □ Undergraduate
     □ Graduate

4. This institution is accredited by the following accrediting agency(ies). [Check all that apply]
   ✓ National institutional or specialized accrediting agency
   ✓ Regional accrediting agency - Specify
     Middle States Assoc. of Colleges and Schools, Comm. on Higher Ed.
   ✓ State accrediting or approval agency
   □ Not applicable

5. Is this institution or any of its programs, departments, or schools currently accredited by any of the accrediting agencies recognized by the Secretary, U.S. Department of Education, which are on the list of National Institutional and Specialized Accrediting Bodies?
   ☐ Yes  List of Accrediting Bodies
   ☐ No
Part B - Organization and Accreditation

- American Dietetic Association, The
  - ☑ Dietetics (DIET) - Coordinated undergraduate and graduate programs

- American Occupational Therapy Association
  - ☑ Occupational Therapy Assistant (OTA) - Programs leading to an associate degree or certificate

- American Physical Therapy Association
  - ☑ Physical Therapy (PTAA) - Programs for the physical therapist assistant

- National League for Nursing Accrediting Commission
  - ☑ Nursing (ADNUR) - Associate degree programs

- New York State Board of Regents (a nationally recognized State agency)
  - ☑ Accreditation of collegiate degree-granting programs or curricula offered by institutions of higher education and of credit-bearing certificate and diploma programs offered by degree-granting institutions of higher education located in the state of New York
Part C - Admission Requirements and Services

1. Does your institution have an open admission policy for all or most entering first-time undergraduate-level students?

If you answer No to this question you will be expected to answer additional questions on your admissions procedures.

- Yes
- No
- This institution does not admit first-time undergraduate-level students.

CAVEATS
Part C - Admission Requirements and Services

5. Does your institution accept any of the following? [Check all that apply]

- [ ] Dual credit (college credit earned while in high school)
- [x] Credit for life experiences
- [x] Advanced placement (AP) credits
- [ ] None of the above

6. What types of special learning opportunities are offered by your institution? [Check all that apply]

- [x] Accelerated programs
- [ ] Cooperative (work-study) programs
- [ ] Distance learning opportunities
- [x] Dual enrollment
- [ ] ROTC
  - [ ] Army
  - [ ] Navy
  - [ ] Air Force
- [x] Study abroad
- [ ] Weekend college
- [ ] Teacher certification (below the postsecondary level)
  - [ ] Students can complete their preparation in certain areas of specialization
  - [ ] Students must complete their preparation at another institution for certain areas of specialization
  - [ ] This institution is approved by the state for the initial certification or licensure of teachers
- [ ] None of the above
Part C - Admission Requirements and Services

8. Which of the following selected students services are offered by your institution? [Check all that apply]

- Remedial services
- Academic/career counseling services
- Employment services for current students
- Placement services for program completers
- On-campus day care for children of students
- None of the above

9. Does your institution have its own library or are you financially supporting a shared library with another postsecondary education institution?

- Have our own library
- Do not have our own library but contribute financial support to a shared library
- Neither of the above
Part D - Student Charges

Your response to the next question determines how your institution reports graduation rates data in the spring and how you report student charges in Part D of this survey.

1. What is the predominant calendar system at the institution? [Choose one]

   **Standard academic terms**
   Checking one of these systems determines that your institution will provide graduation rates data based on a FALL COHORT and student charges based on a FULL ACADEMIC YEAR.
   - [ ] Semester
   - [ ] Quarter
   - [ ] Trimester
   - [ ] 4-1-4 or similar plan
   - [ ] Other academic calendar

   **Other calendar system**
   Checking one of the following determines that your institution will provide graduation rates data based on a FULL YEAR COHORT and student charges data will be requested by PROGRAM.
   - [ ] Differs by program
   - [ ] Continuous basis (every 2 weeks, monthly, or other period)

2. Is an application fee for admission required by your institution?

   - [ ] No
   - [ ] Yes - Indicate amount of application fee
   
<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
<th>Prior year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate</td>
<td>50</td>
<td>40</td>
</tr>
<tr>
<td>Graduate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First-professional</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part D - Student Charges

3. **Does your institution enroll any of the following types of students?**
   *Include all levels that your institution offers, even if there are no students currently enrolled at that level.*

   The answers to these questions determine which screens will be generated for reporting academic year tuition charges, and for reporting Fall Enrollment during the Winter and Spring collections. Additionally, checking **Yes** for full-time, first-time, degree/certificate-seeking undergraduate students determines that your institution must report pricing information for these students (on the IC survey) and Student Financial Aid information in the Spring collection.

<table>
<thead>
<tr>
<th>Undergraduate (academic or occupational programs)</th>
<th>Full-time</th>
<th>Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>First-time, degree/certificate-seeking undergraduate</th>
<th>Full-time</th>
<th>Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Graduate</th>
<th>Full-time</th>
<th>Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

4. **Does your institution charge different tuition for in-district, in-state, or out-of-state students?**
   *If you answer **Yes** to this question, you will be expected to report tuition amounts for in-district, in-state, and out-of-state students.*

   | No | Yes |

5. **Does your institution provide on-campus housing?**
   *If you answer **Yes** to this question, you will be expected to specify a dormitory capacity, and to report a room charge or a combined room and board charge (D12 and D13).*

<table>
<thead>
<tr>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Specify dormitory capacity for academic year 2003-04.</td>
</tr>
</tbody>
</table>

6. **Do you provide board or meal plans to your students?**
   *If you answer **Yes** to this question, you will be expected to report a board charge or combined room and board charge (D12 and D13).*

   | No | Yes - Number of meals per week in the maximum meal plan offered |
   |    | Yes - Number of meals per week can vary (for example, student receives a meal card and charges meals against the card) |
### Part D - Undergraduate Student Charges

#### 7. Charges to full-time undergraduate students for the full academic year 2003-04

<table>
<thead>
<tr>
<th></th>
<th>In-district</th>
<th>Prior year</th>
<th>In-state</th>
<th>Prior year</th>
<th>Out-of-state</th>
<th>Prior year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average tuition</td>
<td>2,800</td>
<td>2,500</td>
<td>2,800</td>
<td>2,500</td>
<td>4,560</td>
<td>3,076</td>
</tr>
<tr>
<td>Required fees</td>
<td>292</td>
<td>292</td>
<td>292</td>
<td>292</td>
<td>292</td>
<td>292</td>
</tr>
<tr>
<td>Comprehensive fee</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

Report a comprehensive fee only if tuition/room/board charges cannot be separated.

#### 8. Per credit hour charge for part-time undergraduate students

<table>
<thead>
<tr>
<th></th>
<th>In-district</th>
<th>Prior year</th>
<th>In-state</th>
<th>Prior year</th>
<th>Out-of-state</th>
<th>Prior year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Per credit hour charge</td>
<td>120</td>
<td>135</td>
<td>120</td>
<td>135</td>
<td>190</td>
<td>285</td>
</tr>
</tbody>
</table>

Institution: CUNY LA GUARDIA COMMUNITY COLLEGE (190628) 
User ID: 36C0025
### Part D - Student Charges

13. **Price of attendance for full-time, first-time undergraduate students:**

Please enter the amounts requested below. These data will be made available to the public on the IPEDS COOL (College Opportunities On-Line) Web site. Data for prior years may be corrected. If your institution participates in any Title IV programs (Pell, Stafford, etc.), you must complete all information for the current year. Estimates of expenses for books and supplies, room and board, and other expenses are those used by your financial aid office for determining financial need.

<table>
<thead>
<tr>
<th>Charges for full academic year</th>
<th>2001-02</th>
<th>2002-03</th>
<th>2003-04</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Published tuition and required fees:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In-district</td>
<td>2,622</td>
<td>2,792</td>
<td>3,092</td>
</tr>
<tr>
<td>In-state</td>
<td>2,622</td>
<td>2,792</td>
<td>3,092</td>
</tr>
<tr>
<td>Out-of-state</td>
<td>3,198</td>
<td>3,368</td>
<td>4,852</td>
</tr>
<tr>
<td>Books and supplies</td>
<td>670</td>
<td>692</td>
<td>759</td>
</tr>
<tr>
<td><strong>On campus:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Room and board</td>
<td>NA</td>
<td>NA</td>
<td></td>
</tr>
<tr>
<td>Other expenses</td>
<td>NA</td>
<td>NA</td>
<td></td>
</tr>
<tr>
<td><strong>Off campus (not with family):</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Room and board</td>
<td>6,436</td>
<td>6,619</td>
<td>6,796</td>
</tr>
<tr>
<td>Other expenses</td>
<td>3,881</td>
<td>3,882</td>
<td>4,090</td>
</tr>
<tr>
<td><strong>Off campus (with family):</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other expenses</td>
<td>2,276</td>
<td>3,245</td>
<td>3,390</td>
</tr>
</tbody>
</table>

**CAVEATS**
Institution: CUNY LA GUARDIA COMMUNITY COLLEGE (190628)  
User ID: 36C0025

**Part E - Additional Information**

1. **Is this institution a member of a national athletic association?**
   - ☐ No
   - ☐ Yes - Check all that apply
     - ☐ National Collegiate Athletic Association (NCAA)
     - ☐ National Association of Intercollegiate Athletics (NAIA)
     - ☐ National Junior College Athletic Association (NJCAA)
     - ☐ National Small College Athletic Association (NSCAA)
     - ☐ National Christian College Athletic Association (NCCAA)
     - ☐ Other

2. **If this institution is a member of the NCAA or NAIA, specify the conference FOR EACH SPORT using the droplist.**

<table>
<thead>
<tr>
<th>Sport</th>
<th>NCAA or NAIA member</th>
<th>Conference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Football</td>
<td>☐ No</td>
<td>☐ Yes-Specify</td>
</tr>
<tr>
<td>Basketball</td>
<td>☐ No</td>
<td>☐ Yes-Specify</td>
</tr>
<tr>
<td>Baseball</td>
<td>☐ No</td>
<td>☐ Yes-Specify</td>
</tr>
<tr>
<td>Cross country and/or track</td>
<td>☐ No</td>
<td>☐ Yes-Specify</td>
</tr>
</tbody>
</table>
5. **For academic year 2000-01, did your institution enroll any full-time, first-time students?**
   If you answer Yes to this question, you will be required to provide Graduation Rates data for 2000-01 in the Spring collection. If you answer No to this question, please indicate the reason you are not required to report Graduation Rates for the cohort year requested.
   - [ ] No
     - This institution did not enroll full-time, first-time degree/certificate-seeking students.
     - This institution was not in operation in 2000-01.
   - [ ] Yes

6. **Did your institution offer athletically-related aid to ANY students in academic year 2002-03?**
   If you answer Yes to this question, you will be provided with screens to report the total number of students that received athletically-related student aid during the 2002-03 academic year (Section V of the Graduation Rates survey).
   - [ ] No.
   - [ ] Yes.

7. **Does your institution have 15 or more full-time employees?**
   If you answer Yes to this question, you will be required to provide Fall Staff data during the Winter collection.
   - [ ] No
   - [ ] Yes

8. **Do all of the instructional faculty at your institution fall into any of the following categories?**
   If you answer Yes to any of the questions below, the Salaries survey is not applicable to your institution. You will NOT be required to report Salaries data during the Winter collection.
   - [ ] No  [ ] Yes  Are all of the instructional faculty employed on a part-time basis?
   - [ ] No  [ ] Yes  Are all of the instructional faculty military personnel?
   - [ ] No  [ ] Yes  Do all of the instructional faculty contribute their services (e.g., members of a religious order)?
   - [ ] No  [ ] Yes  Do all of the instructional faculty teach pre-clinical or clinical medicine?