Institution Data

Bureau for Private Postsecondary Education

Department of Consumer Affairs

2025 Annual Report

Institution Data Workflow

(Printer Friendly Annual Report Instructions Document)

2025 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 *

2025

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.

5001211

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.

Abrams College

4. Street Address (Physical Location) *

201 East Rumble Road, Ste E

5. City *

Modesto

6. State *

CA

7. Zip Code *

95350

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")

0

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

2025 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_2025 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, 2025 and December 31, 2025. 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_2025 report to the institution's Annual Report submission. Uploaded files must be in Excel or CSV formats.

Please contact the Annual Report Unit at BPPE.Annualreport@dca.ca.gov with questions about this requirement.

AR_LaborMarketData_2025.xlsx

Upload completed Excel or CSV here *

Fees / Accreditation

2025 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.

N/A

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

2025 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)? *

No

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

No

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".

0

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

No

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

0

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. *

$0.00

Offerings

2025 BPPE Annual Report - Institution - Offerings

Display Instructions for #27 - #37 (Toggle)
Not Checked

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".

293

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".

5

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".

293

Total Program Count

5

Website / Uploads

2025 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

www.abramscollege.com

38. Upload School Performance Fact Sheet *
Required file format = PDF

Abrams College School Performance Fact Sheets 2024-2025 for Annual Report 2025.pdf

39. Upload Catalog *
Required file format = PDF

College Catalog 2025 for Annual Report 2025.pdf

40. Upload Enrollment Agreement *
Required file format = PDF

Abrams College Enrollment Agreements 2025 for Annual Report 2025.pdf

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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

Institution Information



Bureau for Private Postsecondary Educatio
Department of Consumer Affairs

2025 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2025 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 *

2025

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.

5001211

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.

Abrams College

Program Name

2025 BPPE Annual Report - Program - Program Name

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

4. Name of Program *

Emergency Medical Technician

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

2025 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".

130

9. Total Charges for this Program *

$2,190.00

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".

141

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

141

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

130

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

92.19858

16. 150% Graduates?

0

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

2025 BPPE Annual Report - Program - Placement Data

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

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

60

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

53

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

88.33333

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22. Graduates employed in the field...

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

12

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

41

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23. Indicate the number of graduates employed...

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

53

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".

1

Allied Health

2025 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

2025 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? *

Yes

You have indicated "Yes" for question #26, please complete #26a below and the following screens with the required Exam Passage Rate - Year 1 and Exam Passage Rate – Year 2. (Two years of data is required.)

26a. Do graduates have the option or requirement for more than one type of licensing State exam? *

No

Exam Passage Rate - Year 1

2025 BPPE Annual Report - Program - Exam Passage Rate Data - 2024

Display Instructions for #27-34 (Toggle)

Not Checked

27. Name of the State licensing entity that licenses this field *

National Registry for Emergency Medical Technicians/ County Emergency Medical Services Agency

28. Name of State Exam *

National Registry for Emergency Medical Technicians

29. Number of Graduates Taking State Exam *
If none, indicate "0".

59

30. Number Who Passed the State Exam *
If none, indicate "0".

40

31. Number Who Failed the State Exam
This is a calculated field based on #25 and #26.

19

32. Passage Rate
This is a calculated field based on #25 and #26.

67.79661

33. Is this data from the State licensing agency that administered the exam? *

No

34. If the response to #33 was "No" provide a description of the process used for Attempting to Contact Students *

Graduate Surveys were used to collect data

Exam Passage Rate - Year 2

2025 BPPE Annual Report - Program - Exam Passage Rate Data - 2025

Display Instructions for #35-42 (Toggle)
Not Checked

35. Name of the State licensing entity that licenses this field *

National Registry for Emergency Medical Technicians/ County Emergency Medical Services Agency

36. Name of State Exam *

National Registry for Emergency Medical Technicians

37. Number of Graduates Taking State Exam *
If none, indicate "0".

79

38. Number Who Passed the State Exam *
If none, indicate "0".

67

39. Number Who Failed the State Exam
This is a calculated field based on #33 and #34.

12

40. Passage Rate
This is a calculated field based on #33 and #34.

84.81013

41. Is this data from the State licensing agency that administered the State exam? *

No

42. If the response to #41 was "No" provide a description of the process used for Attempting to Contact Students *

Graduate surveys were used to collect data

Salary Data

2025 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.

60

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

53

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 *

1

$30,001 - $35,000 *

2

$35,001 - $40,000 *

4

$40,001 - $45,000 *

0

$45,001 - $50,000 *

5

$50,001 - $55,000 *

2

$55,001 - $60,000 *

0

$60,001 - $65,000 *

2

$65,001 - $70,000 *

1

$70,001 - $75,000 *

1

$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 Educatio
Department of Consumer Affairs

2025 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2025 BPPE Annual Report - Program - Institution Data

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1. Report Year *

2025

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.

5001211

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.

Abrams College

Program Name

2025 BPPE Annual Report - Program - Program Name

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

4. Name of Program *

Phlebotomy & EKG Technician

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

2025 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".

63

9. Total Charges for this Program *

$3,750.00

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".

70

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

70

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

63

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

90

16. 150% Graduates?

0

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

2025 BPPE Annual Report - Program - Placement Data

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

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

31

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

18

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

58.06452

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22. Graduates employed in the field...

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

11

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

7

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23. Indicate the number of graduates employed...

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

18

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".

2

Allied Health

2025 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

2025 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? *

Yes

You have indicated "Yes" for question #26, please complete #26a below and the following screens with the required Exam Passage Rate - Year 1 and Exam Passage Rate – Year 2. (Two years of data is required.)

26a. Do graduates have the option or requirement for more than one type of licensing State exam? *

Yes

Name of Option/Requirement (1) *

National Center for Competency Testing

Name of Option/Requirement (2)

N/A

Name of Option/Requirement (3)

N/A

Name of Option/Requirement (4)

N/A

Exam Passage Rate - Year 1

2025 BPPE Annual Report - Program - Exam Passage Rate Data - 2024

Display Instructions for #27-34 (Toggle)
Not Checked

27. Name of the State licensing entity that licenses this field *

California Department of Public Health/ Laboratory Field Services

28. Name of State Exam *

National Center for Competency Testing

29. Number of Graduates Taking State Exam *
If none, indicate "0".

49

30. Number Who Passed the State Exam *
If none, indicate "0".

47

31. Number Who Failed the State Exam
This is a calculated field based on #25 and #26.

2

32. Passage Rate
This is a calculated field based on #25 and #26.

95.91837

33. Is this data from the State licensing agency that administered the exam? *

No

34. If the response to #33 was "No" provide a description of the process used for Attempting to Contact Students *

Graduate Surveys were used to contact graduates and collect data

Exam Passage Rate - Year 2

2025 BPPE Annual Report - Program - Exam Passage Rate Data - 2025

Display Instructions for #35-42 (Toggle)
Not Checked

35. Name of the State licensing entity that licenses this field *

California Department of Public Health/ Laboratory Fiels Services

36. Name of State Exam *

National Center for Competency Testing

37. Number of Graduates Taking State Exam *
If none, indicate "0".

38

38. Number Who Passed the State Exam *
If none, indicate "0".

35

39. Number Who Failed the State Exam
This is a calculated field based on #33 and #34.

3

40. Passage Rate
This is a calculated field based on #33 and #34.

92.10526

41. Is this data from the State licensing agency that administered the State exam? *

No

42. If the response to #41 was "No" provide a description of the process used for Attempting to Contact Students *

Surveys were used to contact graduates and collect data

Salary Data

2025 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.

31

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

18

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 *

1

$25,001 - $30,000 *

0

$30,001 - $35,000 *

4

$35,001 - $40,000 *

2

$40,001 - $45,000 *

0

$45,001 - $50,000 *

1

$50,001 - $55,000 *

1

$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 *

1

$85,001 - $90,000 *

0

$90,001 - $95,000 *

0

$95,001 - $100,000 *

0

Over $100,000 *

0

Institution Information



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2025 Annual Report

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3. Institution Name (auto-populated) *
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Abrams College

Program Name

2025 BPPE Annual Report - Program - Program Name

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

4. Name of Program *

Paralegal

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

2025 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".

4

9. Total Charges for this Program *

$3,425.00

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".

6

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

6

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

4

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

66.66667

16. 150% Graduates?

0

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

2025 BPPE Annual Report - Program - Placement Data

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

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

3

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

2

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

66.66667

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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".

2

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23. Indicate the number of graduates employed...

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

2

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

2025 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

2025 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

2025 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.

3

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

2

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 *

1

$45,001 - $50,000 *

0

$50,001 - $55,000 *

0

$55,001 - $60,000 *

0

$60,001 - $65,000 *

1

$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 Educatio
Department of Consumer Affairs

2025 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2025 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 *

2025

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.

5001211

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.

Abrams College

Program Name

2025 BPPE Annual Report - Program - Program Name

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

4. Name of Program *

Medical Assistant

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

2025 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".

47

9. Total Charges for this Program *

$3,425.00

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".

59

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

59

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

47

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

79.66102

16. 150% Graduates?

0

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

2025 BPPE Annual Report - Program - Placement Data

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

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

22

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

15

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

68.18182

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22. Graduates employed in the field...

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

4

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

11

---

23. Indicate the number of graduates employed...

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

15

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

2025 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
AA Foot and Ankle	1255707766	Medical Assistant	11	5
Mercy West Urgent Care	1154615391	Medical Assistant	3	1
Valley Orthopedic Bone and Join	1457836678	Medical Assistant	5	4
Family 1st Medical Care	1689066029	Medical Assistant	1	0
Sonora Primary Care	1366519431	Medical Assistant	1	0
Stanislaus Cardiology	19028288411	Medical Assistant	1	0
Laurel Fertility Clinic	1245249853	Medical Assistant	1	0
209 Urgent Care	1215440631	Medical Assistant	3	2

Work Hub Work Health Services	1215477955	Medical Assistant	1	0
Skin and Cancer Institute	1003449703	Medical Assistant	6	3
Tomorrows Home HCS	1417872136	Medical Assistant	1	0
Pain Clinics of Central California / Modesto Surgery Center	1861060733	Medical Assistant	11	4
Progressive Urgent Care	1164957486	Medical Assistant	2	2

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
AA Foot and Ankle	$0.00	None
Mercy West Urgent Care	$0.00	None
Valley Orthopedic Bone and Joint	$0.00	None
Family 1st Medical Care	$0.00	None
Sonora Primary Care	$0.00	None
Stanislaus Cardiology	$0.00	None
Laurel Fertility Clinic	$0.00	None
209 Urgent Care	$0.00	None
Work Hub Work Health Services	$0.00	None
Skin and Cancer Institute	$0.00	None
Tomorrows Home HCS	$0.00	None
Pain Clinics of Central California/ Modesto Surgery Center	$0.00	None
Progressive Urgent Care	$0.00	None

Exam Passage Rate

2025 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

2025 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.

22

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

15

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 *	$5,001 - $10,000 *
0	**0**
$10,001 - $15,000 *	$15,001 - $20,000 *
0	**0**
$20,001 - $25,000 *	$25,001 - $30,000 *
1	**1**
$30,001 - $35,000 *	$35,001 - $40,000 *
0	**0**
$40,001 - $45,000 *	$45,001 - $50,000 *
0	**0**
$50,001 - $55,000 *	$55,001 - $60,000 *
0	**0**
$60,001 - $65,000 *	$65,001 - $70,000 *
1	**0**
$70,001 - $75,000 *	$75,001 - $80,000 *
0	**0**
$80,001 - $85,000 *	$85,001 - $90,000 *
0	**0**

$90,001 - $95,000 *

0

$95,001 - $100,000 *

0

Over $100,000 *

0

Institution Information



Bureau for Private Postsecondary Educatio
Department of Consumer Affairs

2025 Annual Report

Program Data Workflow

(Printer Friendly Annual Report Instructions Document)

2025 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 *

2025

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.

5001211

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.

Abrams College

Program Name

2025 BPPE Annual Report - Program - Program Name

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

4. Name of Program *

Pharmacy Technician

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

2025 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".

16

9. Total Charges for this Program *

$3,425.00

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".

17

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

17

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

16

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

94.11765

16. 150% Graduates?

0

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

2025 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".

5

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

62.5

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22. Graduates employed in the field...

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

2

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

3

---

23. Indicate the number of graduates employed...

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

5

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

2025 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

2025 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? *

Yes

You have indicated "Yes" for question #26, please complete #26a below and the following screens with the required Exam Passage Rate - Year 1 and Exam Passage Rate – Year 2. (Two years of data is required.)

26a. Do graduates have the option or requirement for more than one type of licensing State exam? *

No

Exam Passage Rate - Year 1

2025 BPPE Annual Report - Program - Exam Passage Rate Data - 2024

Display Instructions for #27-34 (Toggle)

Not Checked

27. Name of the State licensing entity that licenses this field *

California Board of Pharmacy

28. Name of State Exam *

None

29. Number of Graduates Taking State Exam *
If none, indicate "0".

0

30. Number Who Passed the State Exam *
If none, indicate "0".

0

31. Number Who Failed the State Exam
This is a calculated field based on #25 and #26.

0

32. Passage Rate
This is a calculated field based on #25 and #26.

33. Is this data from the State licensing agency that administered the exam? *

No

34. If the response to #33 was "No" provide a description of the process used for Attempting to Contact Students *

Graduates are not required to take an exam to work in the state of California. Graduates are required to be registered with California Board of Pharmacy to be eligible for employment. Registration with the Board of Pharmacy Doesn't require taking an exam.

Exam Passage Rate - Year 2

2025 BPPE Annual Report - Program - Exam Passage Rate Data - 2025

Display Instructions for #35-42 (Toggle)
Not Checked

35. Name of the State licensing entity that licenses this field *

California Board of Pharmacy

36. Name of State Exam *

None

37. Number of Graduates Taking State Exam *
If none, indicate "0".

0

38. Number Who Passed the State Exam *
If none, indicate "0".

0

39. Number Who Failed the State Exam
This is a calculated field based on #33 and #34.

0

40. Passage Rate
This is a calculated field based on #33 and #34.

41. Is this data from the State licensing agency that administered the State exam? *

No

42. If the response to #41 was "No" provide a description of the process used for Attempting to Contact Students *

Graduates are not required to take an exam to work in the State of California. Graduates are required to be registered with the California Board of Pharmacy To be eligible for employment in the field. Registration doesn't required taking an exam.

Salary Data

2025 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.

5

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 *

2

$30,001 - $35,000 *

2

$35,001 - $40,000 *

1

$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