You can now Print this page for your records.

After printing, you can proceed to enter in additional Programs data OR you can begin to enter in Branches data

**BPPE Annual Report for 2014 – Programs**

**Tracking Number:** 2015081313830

**Report for Year:** 2014

**Institution Code:** 3703811

**INFORMATION FOR EACH EDUCATIONAL PROGRAM OFFERED AT THE INSTITUTION**

**Degree/Program Level:** Doctorate

If Other, please specify:

**Degree/Program Title:** PhD

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

**Name of Program (e.g. Business Administration, Massage, etc.):** Integral Health

**Number of Degrees or Diplomas Awarded:** 0

**Total Charges for this program (Report whole dollars only):** $29898

**Number of Students Who Began the Program:** 0

**Students Available for Graduation:** 0

**Graduates:** 0

**Completion Rate:** 0

**150% Completion Rate:** 0

Is the above data taken from the data that was reported to and calculated by the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education?:

[Annual Report Programs - Bureau for Private Postsecondary Education](https://www.dca.ca.gov/webapps/bppe/programs_print.php?id=2015081313830)
PLACEMENT
Graduates Available for Employment: 0
Graduates Employed in the Field: 0
Placement Rate: 0
Graduates employed in the field an average of less than 32 hours per week: 0
Graduates employed in the field an average of 32 or more hours per week: 0

EXAM PASSAGE RATE
Does this educational program lead to an occupation that requires licensing?: no
If Yes, please provide the information below (For each of the last two years):
First Data Year (YYYY):
Name of the licensing entity that licenses this field:
Name of Exam:
Number of Students Taking Exam:
Number Who Passed the Exam:
Number Who Failed the Exam:
Passage Rate:
Is this data from the licensing agency that administered the exam?:
Name of Agency:
If the response was no, provide a description of the process used for attempting to contact students:
Second Data Year (YYYY):
Name of the licensing entity that licenses this field:
Name of Exam:
Number of Students Taking Exam:
Number Who Passed the Exam:
Number Who Failed the Exam:

Passage Rate:

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

Name of Agency:

If the response was no, provide a description of the process used for attempting to contact students:

Do graduates have the option or requirement for more than one type of licensing exam?:

Provide the names of other licensing exam options:
Name of Option/Requirement:
Name of Option/Requirement:
Name of Option/Requirement:

SALARY DATA
Graduates Available for Employment: 0
Graduates Employed in the Field: 0
Graduates Employed in the Field Reported receiving the following Salary or Wage:

$0 - $5,000.00: 0
$5,001.00 - $10,000.00: 0
$10,001.00 - $15,000.00: 0
$15,001.00 - $20,000.00: 0
$20,001.00 - $25,000.00: 0
$25,001.00 - $30,000.00: 0
$30,001.00 - $35,000.00: 0
$35,001.00 - $40,000.00: 0
$40,001.00 - $45,000.00: 0
$45,001.00 - $50,000.00: 0
<table>
<thead>
<tr>
<th>Salary Range</th>
<th>Count</th>
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