



Department of Consumer Affairs

# Bureau for Private Postsecondary Education

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## **BPPE Annual Report for 2016 - Institution**

**Tracking Number:** 2017082892056

**Report for Year:** 2016

**Institution Name:** Dialysis Training Institute LLC

**Institution Code (If an institution has branch locations the institution code is the school code for the main location):** 1940171

**Street Address (Physical Location):** 6131 Orangethorpe Ave Suite 215

**City:** Buena Park

**State:** California

**Zip Code:** 90620

**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:** 0

**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:** yes

**If you answered yes to the question above, please identify the accrediting agency:**

Accrediting Bureau of Health Education Schools

**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?:** N/A

**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?:** N/a

**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?:** N/A

**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?:** yes

**What is the total amount of WIOA funds received by your institution in 2016?:** 90811.00

**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:** N/A

**The percentage of institutional income in 2016 that was derived from public funding:**  
20%

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

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

**Total number of students enrolled at this institution:** 70

**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: 70**

**Institution's website:** <http://www.dti.edu>

**Performance Fact Sheet:** <http://www.dti.edu/wp-content/uploads/2017/08/SPFS-2015-2016.pdf>

**2016 Catalog:** <http://www.dti.edu/wp-content/uploads/2017/08/Course-Catalog-2017-2018-approved-.pdf>

**Annual Report:** <http://www.dti.edu/wp-content/uploads/2017/08/BPPE-2016-Annual-Report.pdf>



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you can begin to enter in [Branches](#) data

**BPPE Annual Report for 2016 – Programs****Tracking Number:** 2017082895043**Report for Year:** 2016**Institution Name:** Dialysis Training Institute LLC**Institution Code:** 1940171**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.):** Hemodialysis Training  
Program**Number of Degrees or Diplomas Awarded:** 62**Total Charges for this program (Report whole dollars only):** \$ 8000**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:** 70**Students Available for Graduation:** 69

**On-time Graduates: 53**

**Completion Rate: 77**

**150% Completion Rate: 9**

**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: 62**

**Graduates Employed in the Field: 46**

**Placement Rate: 74**

**Graduates employed in the field 20 to 29 hours per week: 0**

**Graduates employed in the field at least 30 hours per week: 46**

**Indicate the number of graduates employed:**

**Single position in field: 46**

**Concurrent aggregated positions in field (2 or more positions at the same time): 0**

**Freelance/self-employed: 0**

**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: California Department of Public Health**

**Name of Exam: CHT Exam**

**Number of Graduates Taking State Exam: 38**

**Number Who Passed the State Exam: 35**

**Number Who Failed the State Exam: 3**

**Passage Rate: 92**

**Is this data from the State licensing agency that administered the exam?: no**

**Name of Agency:** N/A

**If the response to #29 was no, provide a description of the process used for attempting to contact students:**

Student Sevices contacts students to verify they have taken and passed the CHT exam.

**Second Data Year 2015:**

**Name of the State licensing entity that licenses this field:** California Department of Public Health

**Name of State Exam:** CHT Exam

**Number of Graduates Taking State Exam:** 36

**Number Who Passed the State Exam:** 36

**Number Who Failed the State Exam:** 0

**Passage Rate:** 100

**Is this data from the licensing agency that administered the State exam?:** no

**Name of Agency:** N/A

**If the response to #37 was no, provide a description of the process used for attempting to contact students:**

Student Sevices contacts students to verify they have taken and passed the CHT exam.

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

**Provide the names of other licensing exam options:**

**Name of Option/Requirement:** BONENT

**Name of Option/Requirement:** NNCC

**Name of Option/Requirement:** NNCO

**SALARY DATA**

**Graduates Available for Employment:** 62

**Graduates Employed in the Field:** 46

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

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

- \$5,001 - \$10,000:**
- \$10,001 - \$15,000:**
- \$15,001 - \$20,000:**
- \$20,001 - \$25,000:**
- \$25,001 - \$30,000:**
- \$30,001 - \$35,000:**
- \$35,001 - \$40,000: 40**
- \$40,001 - \$45,000: 1**
- \$45,001 - \$50,000:**
- \$50,001 - \$55,000:**
- \$55,001 - \$60,000:**
- \$60,001 - \$65,000:**
- \$65,001 - \$70,000: 3**
- \$70,001 - \$75,000:**
- \$75,001 - \$80,000:**
- \$80,001 - \$85,000:**
- \$85,001 - \$90,000:**
- \$90,001 - \$95,000:**
- \$95,001 - \$100,000:**
- Over \$100,000:**



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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:** 2017082895314

**Report for Year:** 2016

**Institution Name:** Dialysis Training Institute LLC

**Institution Code:** 1940171

**Total number of students at this branch location?** 70

**Name of programs offered at this branch locations?** Hemodialysis Training Program

**Branch Address:** 6131 Orangethorpe Ave Suite 215

**Branch City:** Buena Park

**Branch State:** California

**Branch Zip Code:** 90620