









Bureau of Proprietary School Supervision (Teach.do)

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Fields marked with an asterisk (*) are required. 

OEDS reporting period (2023) for: Medical Assistant - 4216

Reporting period is from 07/01/2021 to 06/30/2022

Values must be numeric. Do not place commas or \$ / Round to the nearest whole number

For Example, if a dollar amount is requested and your value is \$2,345.56 your should enter 2346

School and Curriculum Information Hide/Show

School and Curriculum Information

Total Clock Hours The total number of hours and listed on the curriculum application

Hours

Total curriculum Cost in USD Total Amount a student will spend on the curriculum.

USD

Registration Fee Cost of Registering for this curriculum.

USD

Total Equipment Cost Include the costs for all Books/Kits/Equipment necessary for the curriculum.

USD

Was this curriculum license active, but not offered, to any student during the reporting period of July 1, 2021 - June 30th 2022

Yes/No

Was the curriculum offered via distance education, based upon temporary distance education approval related to COVID-19

Yes/No

Admissions Hide/Show

Admissions All boxes must be filled in. If none, place a 0 (zero)**Admissions: Total Applications**

Applied

Accepted

Denied

Admissions: High School Diploma Students Possessing HS diploma/High School Equivalency (HSE)

Applied

Accepted

Denied

Admissions: Ability to Benefit Students whom have an Ability to Benefit(ATB)

Applied

Accepted

Denied

Enrollment Hide/Show

Enrollment All boxes must be filled in. If none, place a 0 (zero)**Enrollment: Total Full Time Students** - Enrolled after July 1, 2021 Continued-Enrolled prior to July 1, 2021New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Enrollment: Total Part Time Students**New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Enrollment: Total Enrollments**New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Of the total number of students listed above, how many were Ability to Benefit from each category?**New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021

Outcome Status Hide/Show

Outcome Status All boxes must be filled in. If none, place a 0 (zero)

Total Students

Withdrawn/Dropped out	<input type="text" value="202"/>	Graduates: Enrolled prior to July 1, 2021 and graduated this reporting year	<input type="text" value="163"/>	Graduates: Enrolled and graduated this reporting year	<input type="text" value="158"/>
Continuing: Enrolled this reporting period and continueing on into next reporting period	<input type="text" value="241"/>				

Of the total number of students listed above, how many were Ability to Benefit from each category

Withdrawn/Dropped out	<input type="text" value="0"/>	Graduates: Enrolled prior to July 1, 2021 and graduated this reporting year	<input type="text" value="0"/>	Graduates: Enrolled and graduated this reporting year	<input type="text" value="0"/>
Continuing: Enrolled this reporting period and continueing on into next reporting period	<input type="text" value="0"/>				

Graduation Follow-up: Employment Hide/Show**Graduation Follow-up: Employment** All boxes must be filled in. If none, place a 0 (zero)**Total Number of Students**

In Occupation	<input type="text" value="204"/>	Related Field	<input type="text" value="0"/>	Unrelated Field	<input type="text" value="0"/>
Seeking Employment	<input type="text" value="0"/>	Status Unknown	<input type="text" value="83"/>	Unavailable for Employment	<input type="text" value="34"/>

Of the total number of students listed above, how many were Ability to Benefit for each category

In Occupation	<input type="text" value="0"/>	Related Field	<input type="text" value="0"/>	Unrelated Field	<input type="text" value="0"/>
Seeking Employment	<input type="text" value="0"/>	Status Unknown	<input type="text" value="0"/>	Unavailable for Employment	<input type="text" value="0"/>

Financial Assistance Hide/Show**Financial Assistance** A student may use more than one. All boxes must be filled in. If none, place a 0 (zero)**TAP** New York Tuition Assistance Program

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Direct Plus Loans Made to Parents of Dependant Studnets

Full Time	<input type="text" value="34"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="34"/>
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Federal PELL Grant Basic Education Opportunity Grant

Full Time	<input type="text" value="738"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="738"/>
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Federal Title IV Federal Title IV Loans borrowed by student.

Full Time	<input type="text" value="709"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="709"/>
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Adult Career and Continuing Ed. Services-Voc Rehab ACCES-VR

Full Time	<input type="text" value="1"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="1"/>
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Income Sharing Agreement or Deferred Tuition Agrrement

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Worforce Innovation and Opportunity Act (WIOA)

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Veterans Benefits Federal Veterans Benefits in any form or program

Full Time	<input type="text" value="5"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Private Student Loans Private Student Loans obtained by the student

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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School Issued Credit School Credit

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Employer Sponership through a Home Care Agency

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Other Federal or State Subsidies

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Any other Credit Extended by or on behalf of the Institution that the student is obligated to repay

Full Time	<input type="text" value="689"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Self Funded Student paid out of pocket or did not use any of the above methods

Full Time	<input type="text" value="9"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Education Opportunity Grant








Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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OEDS reporting period (2023) for: Healthcare Management Hybrid Program - 10130

Reporting period is from 07/01/2021 to 06/30/2022

Values must be numeric. Do not place commas or \$ / Round to the nearest whole number

For Example, if a dollar amount is requested and your value is \$2,345.56 your should enter 2346

School and Curriculum Information Hide/Show

School and Curriculum Information

Total Clock Hours The total number of hours and listed on the curriculum application

Hours

Total curriculum Cost in USD Total Amount a student will spend on the curriculum.

USD

Registration Fee Cost of Registering for this curriculum.

USD

Total Equipment Cost Include the costs for all Books/Kits/Equipment necessary for the curriculum.

USD

Was this curriculum license active, but not offered, to any student during the reporting period of July 1, 2021 - June 30th 2022

Yes/No

Was the curriculum offered via distance education, based upon temporary distance education approval related to COVID-19

Yes/No

Admissions Hide/Show**Admissions** All boxes must be filled in. If none, place a 0 (zero)**Admissions: Total Applications**

Applied

Accepted

Denied

Admissions: High School Diploma Students Possessing HS diploma/High School Equivalency (HSE)

Applied

Accepted

Denied

Admissions: Ability to Benefit Students whom have an Ability to Benefit(ATB)

Applied

Accepted

Denied

Enrollment Hide/Show**Enrollment** All boxes must be filled in. If none, place a 0 (zero)**Enrollment: Total Full Time Students** - Enrolled after July 1, 2021 Continued-Enrolled prior to July 1, 2021New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Enrollment: Total Part Time Students**New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Enrollment: Total Enrollments**New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Of the total number of students listed above, how many were Ability to Benefit from each category?**New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Outcome Status Hide/Show**

Outcome Status All boxes must be filled in. If none, place a 0 (zero)

Total Students

Withdrawn/Dropped out	<input type="text" value="0"/>	Graduates: Enrolled prior to July 1, 2021 and graduated this reporting year	<input type="text" value="0"/>	Graduates: Enrolled and graduated this reporting year	<input type="text" value="0"/>
Continuing: Enrolled this reporting period and continuing on into next reporting period	<input type="text" value="7"/>				

Of the total number of students listed above, how many were Ability to Benefit from each category

Withdrawn/Dropped out	<input type="text" value="0"/>	Graduates: Enrolled prior to July 1, 2021 and graduated this reporting year	<input type="text" value="0"/>	Graduates: Enrolled and graduated this reporting year	<input type="text" value="0"/>
Continuing: Enrolled this reporting period and continuing on into next reporting period	<input type="text" value="0"/>				

Graduation Follow-up: Employment Hide/Show

Graduation Follow-up: Employment All boxes must be filled in. If none, place a 0 (zero)

Total Number of Students

In Occupation	<input type="text" value="0"/>	Related Field	<input type="text" value="0"/>	Unrelated Field	<input type="text" value="0"/>
Seeking Employment	<input type="text" value="0"/>	Status Unknown	<input type="text" value="0"/>	Unavailable for Employment	<input type="text" value="0"/>

Of the total number of students listed above, how many were Ability to Benefit for each category

In Occupation	<input type="text" value="0"/>	Related Field	<input type="text" value="0"/>	Unrelated Field	<input type="text" value="0"/>
Seeking Employment	<input type="text" value="0"/>	Status Unknown	<input type="text" value="0"/>	Unavailable for Employment	<input type="text" value="0"/>

Financial Assistance Hide/Show

Financial Assistance A student may use more than one. All boxes must be filled in. If none, place a 0 (zero)

TAP New York Tuition Assistance Program

Full Time

Part Time

Total

Direct Plus Loans Made to Parents of Dependant Studnets

Full Time

Part Time

Total

Federal PELL Grant Basic Education Opportunity Grant

Full Time

Part Time

Total

Federal Title IV Federal Title IV Loans borrowed by student.

Full Time

Part Time

Total

Adult Career and Continuing Ed. Services-Voc Rehab ACCES-VR

Full Time

Part Time

Total

Income Sharing Agreement or Deferred Tuition Agreement

Full Time

Part Time

Total

Workforce Innovation and Opportunity Act (WIOA)

Full Time

Part Time

Total

Veterans Benefits Federal Veterans Benefits in any form or program

Full Time

Part Time

Total

Private Student Loans Private Student Loans obtained by the student

Full Time

Part Time

Total

School Issued Credit School Credit

Full Time

Part Time

Total

Employer Sponership through a Home Care Agency

Full Time

Part Time

Total

Other Federal or State Subsidies

Full Time

Part Time

Total

Any other Credit Extended by or on behalf of the Institution that the student is obligated to repay

Full Time

Part Time

Total

Self Funded Student paid out of pocket or did not use any of the above methods

Full Time

Part Time

Total

Education Opportunity Grant








Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Fields marked with an asterisk (*) are required. 

OEDS reporting period (2023) for: Medical Assistant - 4215

Reporting period is from 07/01/2021 to 06/30/2022

Values must be numeric. Do not place commas or \$ / Round to the nearest whole number

For Example, if a dollar amount is requested and your value is \$2,345.56 your should enter 2346

School and Curriculum Information Hide/Show

School and Curriculum Information

Total Clock Hours The total number of hours and listed on the curriculum application

Hours

Total curriculum Cost in USD Total Amount a student will spend on the curriculum.

USD

Registration Fee Cost of Registering for this curriculum.

USD

Total Equipment Cost Include the costs for all Books/Kits/Equipment necessary for the curriculum.

USD

Was this curriculum license active, but not offered, to any student during the reporting period of July 1, 2021 - June 30th 2022

Yes/No

Was the curriculum offered via distance education, based upon temporary distance education approval related to COVID-19

Yes/No

Admissions Hide/Show**Admissions** All boxes must be filled in. If none, place a 0 (zero)**Admissions: Total Applications**

Applied

Accepted

Denied

Admissions: High School Diploma Students Possessing HS diploma/High School Equivalency (HSE)

Applied

Accepted

Denied

Admissions: Ability to Benefit Students whom have an Ability to Benefit(ATB)

Applied

Accepted

Denied

Enrollment Hide/Show**Enrollment** All boxes must be filled in. If none, place a 0 (zero)**Enrollment: Total Full Time Students** - Enrolled after July 1, 2021 Continued-Enrolled prior to July 1, 2021New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Enrollment: Total Part Time Students**New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Enrollment: Total Enrollments**New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Of the total number of students listed above, how many were Ability to Benefit from each category?**New - Enrolled after
July, 2021Continued-Enrolled
prior to July 1, 2021**Outcome Status Hide/Show****Outcome Status** All boxes must be filled in. If none, place a 0 (zero)

Total StudentsWithdrawn/Dropped
out

111

Graduates: Enrolled
prior to July 1, 2021
and graduated this
reporting year

95

Graduates: Enrolled
and graduated this
reporting year

138

Continuing:
Enrolled this
reporting period and
continueing on into
next reporting period

144

Of the total number of students listed above, how many were Ability to Benefit from each categoryWithdrawn/Dropped
out

0

Graduates: Enrolled
prior to July 1, 2021
and graduated this
reporting year

0

Graduates: Enrolled
and graduated this
reporting year

0

Continuing:
Enrolled this
reporting period and
continueing on into
next reporting period

0

Graduation Follow-up: Employment Hide/Show**Graduation Follow-up: Employment** All boxes must be filled in. If none, place a 0 (zero)**Total Number of Students**

In Occupation

137

Related Field

0

Unrelated Field

0

Seeking Employment

57

Status Unknown

0

Unavailable for
Employment

39

Of the total number of students listed above, how many were Ability to Benefit for each category

In Occupation

0

Related Field

0

Unrelated Field

0

Seeking Employment

0

Status Unknown

0

Unavailable for
Employment

0

Financial Assistance Hide/Show**Financial Assistance** A student may use more than one. All boxes must be filled in. If none, place a 0 (zero)**TAP** New York Tuition Assistance Program

Full Time

0

Part Time

0

Total

0

Direct Plus Loans Made to Parents of Dependant Studnets

Full Time	<input type="text" value="29"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="29"/>
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Federal PELL Grant Basic Education Opportunity Grant

Full Time	<input type="text" value="301"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="301"/>
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Federal Title IV Federal Title IV Loans borrowed by student.

Full Time	<input type="text" value="285"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="285"/>
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Adult Career and Continuing Ed. Services-Voc Rehab ACCES-VR

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Income Sharing Agreement or Deferred Tuition Agrrement

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Worforce Innovation and Opportunity Act (WIOA)

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Veterans Benefits Federal Veterans Benefits in any form or program

Full Time	<input type="text" value="4"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Private Student Loans Private Student Loans obtained by the student

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

School Issued Credit School Credit

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

Employer Sponership through a Home Care Agency

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

Other Federal or State Subsidies

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

Any other Credit Extended by or on behalf of the Institution that the student is obligated to repay

Full Time	<input type="text" value="399"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	----------------------------------	-----------	--------------------------------	-------	--------------------------------

Self Funded Student paid out of pocket or did not use any of the above methods

Full Time	<input type="text" value="4"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="4"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

Education Opportunity Grant








Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Fields marked with an asterisk (*) are required. 

OEDS reporting period (2023) for: Allied Health Program - CNA - 8671

Reporting period is from 07/01/2021 to 06/30/2022

Values must be numeric. Do not place commas or \$ / Round to the nearest whole number

For Example, if a dollar amount is requested and your value is \$2,345.56 your should enter 2346

School and Curriculum Information Hide/Show

School and Curriculum Information

Total Clock Hours The total number of hours and listed on the curriculum application

Hours

Total curriculum Cost in USD Total Amount a student will spend on the curriculum.

USD

Registration Fee Cost of Registering for this curriculum.

USD

Total Equipment Cost Include the costs for all Books/Kits/Equipment necessary for the curriculum.

USD

Was this curriculum license active, but not offered, to any student during the reporting period of July 1, 2021 - June 30th 2022

Yes/No

Was the curriculum offered via distance education, based upon temporary distance education approval related to COVID-19

Yes/No

no

Admissions Hide/Show

Admissions All boxes must be filled in. If none, place a 0 (zero)**Admissions: Total Applications**

Applied

78

Accepted

56

Denied

22

Admissions: High School Diploma Students Possessing HS diploma/High School Equivalency (HSE)

Applied

78

Accepted

56

Denied

22

Admissions: Ability to Benefit Students whom have an Ability to Benefit(ATB)

Applied

0

Accepted

0

Denied

0

Enrollment Hide/Show

Enrollment All boxes must be filled in. If none, place a 0 (zero)**Enrollment: Total Full Time Students** - Enrolled after July 1, 2021 Continued-Enrolled prior to July 1, 2021New - Enrolled after
July, 2021

0

Continued-Enrolled
prior to July 1, 2021

0

Enrollment: Total Part Time StudentsNew - Enrolled after
July, 2021

60

Continued-Enrolled
prior to July 1, 2021

9

Enrollment: Total EnrollmentsNew - Enrolled after
July, 2021

60

Continued-Enrolled
prior to July 1, 2021

9

Of the total number of students listed above, how many were Ability to Benefit from each category?New - Enrolled after
July, 2021

0

Continued-Enrolled
prior to July 1, 2021

0

Outcome Status Hide/Show

Outcome Status All boxes must be filled in. If none, place a 0 (zero)

Total Students

Withdrawn/Dropped out

7

Graduates: Enrolled prior to July 1, 2021 and graduated this reporting year

9

Graduates: Enrolled and graduated this reporting year

34

Continuing: Enrolled this reporting period and continueing on into next reporting period

19

Of the total number of students listed above, how many were Ability to Benefit from each category

Withdrawn/Dropped out

0

Graduates: Enrolled prior to July 1, 2021 and graduated this reporting year

0

Graduates: Enrolled and graduated this reporting year

0

Continuing: Enrolled this reporting period and continueing on into next reporting period

0

Graduation Follow-up: Employment Hide/Show**Graduation Follow-up: Employment** All boxes must be filled in. If none, place a 0 (zero)**Total Number of Students**

In Occupation

27

Related Field

0

Unrelated Field

0

Seeking Employment

11

Status Unknown

0

Unavailable for Employment

5

Of the total number of students listed above, how many were Ability to Benefit for each category

In Occupation

0

Related Field

0

Unrelated Field

0

Seeking Employment

0

Status Unknown

0

Unavailable for Employment

0

Financial Assistance Hide/Show**Financial Assistance** A student may use more than one. All boxes must be filled in. If none, place a 0 (zero)**TAP** New York Tuition Assistance Program

Full Time

0

Part Time

0

Total

0

Direct Plus Loans Made to Parents of Dependant Studnets

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Federal PELL Grant Basic Education Opportunity Grant

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Federal Title IV Federal Title IV Loans borrowed by student.

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

Adult Career and Continuing Ed. Services-Voc Rehab ACCES-VR

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

Income Sharing Agreement or Deferred Tuition Agrrement

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

Worforce Innovation and Opportunity Act (WIOA)

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

Veterans Benefits Federal Veterans Benefits in any form or program

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Private Student Loans Private Student Loans obtained by the student

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

School Issued Credit School Credit

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
-----------	--------------------------------	-----------	--------------------------------	-------	--------------------------------

Employer Sponership through a Home Care Agency

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Other Federal or State Subsidies

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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Any other Credit Extended by or on behalf of the Institution that the student is obligated to repay

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="61"/>	Total	<input type="text" value="61"/>
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Self Funded Student paid out of pocket or did not use any of the above methods

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="7"/>	Total	<input type="text" value="7"/>
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Education Opportunity Grant

Full Time	<input type="text" value="0"/>	Part Time	<input type="text" value="0"/>	Total	<input type="text" value="0"/>
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