

APR 14 2015

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Transaction Total: \$1,000.00

Deposit Date: 04/13/2015

Iowa College Student Aid Commission

Application for Registration (Authorization) of Postsecondary Schools Iowa Code Chapter 261B

This is the application form for all schools that are required to register under Iowa Code Chapter 261B.

All items must be completed. If there is insufficient space on the form to provide all requested information, use additional attachments as required, numbering them to correspond to the application item. Other documents or materials may be attached to the form in lieu of providing the information on the form. In such cases, the material or document should be referenced on the form and *clearly* marked for ease of identification.

Submit the complete and electronically signed PDF of the application and any necessary electronic attachments via email to Carolyn.Small@iowa.gov, or on thumb drive or CD to:

Postsecondary Registration Coordinator
Iowa College Student Aid Commission
430 E. Grand Ave., FL 3
Des Moines, Iowa 50309

A school must submit a \$1000 application fee with the application. Please make the check payable to the Iowa College Student Aid Commission and mail to:

Iowa College Student Aid Commission
P.O. Box 310348
Des Moines, IA 50331-0348

The information you provide will be open to public inspection under Iowa Code Chapter 22.11, and posted to the Iowa College Student Aid Commission website under Iowa Code Section 261.2., subsection 7(b).

Exception: A private non-profit or for-profit corporation may submit financial statements associated with its most recent independent auditor's report to the Commission and request that they be treated as confidential. For more information, see item #30:

For assistance or questions regarding the application, contact the Postsecondary Registration Coordinator at:

Carolyn.small@iowa.gov
(515) 725-3413

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(1) Provide the name of school and address of the principal office as defined in Iowa Code Section 490.140 or 510.141: [(261B.4(2))] and [(261B.4(1))]

Name of School: GONNEDIA UNIVERSITY IRVINE Suite: Street: 1530 GONNEDIA WEST
City: IRVINE State: CA Zip: 92612 Country: USA

Telephone Number for the schools' primary state authorization contact (including country or area code):

949.214.8002

E-mail address for the schools' primary authorization contact:

(2) Type of school: For-profit Non-profit Public

(3) If applicable, provide the address of all locations in Iowa where instruction will occur. For a school that is applying for registration to offer distance education programs and who has established, or plans to establish a permanent Iowa site(s) at which students will participate in a structured field experience, the school may record below the location of that Iowa field experience site(s).

Suite: Street:
City: State: Zip:
Telephone:

(4) Provide the total estimated tuition charges, fees and other costs payable to the school by a student over the course of each entire program. [(261B.4(3))] If the school is applying to offer both residential programs that require some face-to-face interaction between student and faculty at an Iowa location, in addition to programs that are offered fully "at a distance," please separately list distance education programs, as illustrated below.

	Residential Program to be Offered in Iowa	Tuition	Fees	Books and Supplies	Other	Estimated Total Program Charges
Add Row	N/A					
Delete Row						
	Distance Education Program to be Offered in Iowa	Tuition	Fees	Books and Supplies	Other	Estimated Total Program Charges
Add Row						
Delete Row						

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(5) Please list all distance education programs that include a structured field experience that the school will permit an Iowa resident to participate in at an Iowa location. For each program that includes a field experience, please attach documentation that describes the expectations of the student, school faculty, and a site supervisor.

NONE

(6) Provide the name of all other State of Iowa agencies required to approve the applicant school in Iowa and the school's contact person at the agency. Attach documentation of the school's approval.

State of Iowa Agency Name:

Contact Person:

N/A

Telephone Number:

E-mail address:

(7) Does the school plan to offer in Iowa, a program that prepares a student for first-time, licensed professional employment?

No

Yes

List the program and the Iowa professional licensure board that licenses persons to practice the profession for which the school's program prepares a student. For each program, attach documentation demonstrating that the school's program either meets the requirements of a programmatic accrediting agency approved by the Iowa professional licensure board, or that the school's program meets the Iowa professional licensure board's curriculum requirements such that a student who completes the school's program is not required to complete additional coursework or practicum hours that the school did not offer in its program.

(8) Provide a link to the school's Internet site, or a description of the school's refund policy for the return of refundable portions of tuition, fees, or other charges [(261B.4(4))] For a for-profit school with at least one program of more than four months in length that leads to a recognized educational credential, the school's tuition refund for Iowa students must comply with Iowa Code Section 714.23. For more information about Iowa Code Section 714.23, contact the Postsecondary Registration Coordinator or see the *Postsecondary Registration* tab on the Commission's main web page at www.iowacollegeaid.gov.

see link to webpage

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(9) Provide the name, business address and telephone number of the chief executive officer of the school: ((261B.4(7)))

Name: President Kurt Kuegel Suite: Street: 1530 CONCORDIA WEST
City: IRVINE State: CA Zip: 92612 Country: U.S.A. Telephone Number: 949.214.8003

(10) Provide a link(s) to the school's Internet site, or describe below the means by which the school provides the following disclosure to students. If the school provides this information in one or more web-based documents, please provide both the link to the document and the page number within the document where the disclosure(s) is located.

1. The name or title of the course.
2. A brief description of the subject matter of the course.
3. The tuition charge or other fees charged for the course. If a student is enrolled in more than one course at the school, the tuition charge or fee for all courses may be stated in one sum.
4. The refund policy of the school for the return of their fundable portion of tuition, fees, or other charges. If refunds are not to be paid, the information shall state that fact.
5. Whether the credential or certificate issued, awarded, or credited to a student upon completion of the course or the fact of completion of the course is applicable toward a degree granted by the school and, if so, under what circumstances the application will be made.
6. The name of the accrediting agency recognized by the United States Department of Education or its successor agency which has accredited the school.

(11) Provide the name, address, and telephone number of a contact person in Iowa. ((261B.4(10))). If the school is applying for distance education and has elected to register with the Iowa Secretary of State as a corporation transacting business in Iowa, please list the corporation's Iowa resident agent. If a distance education provider has not registered with the Iowa Secretary of State, the response to this question may be "not applicable" distance education provider."

Name: Northwest Registered Agent LLC Suite:
Street: First Floor, Lucas Bldg
321 E 12th Street City: Des Moines State: Iowa Zip: 50319
Country: U.S.A. Telephone Number (including country or area code): 515.281.5204

(12) Provide the name, address, and title of the other officers and members of the legal governing body of the school: ((261B.4(6)))

Officer Number 1
Name: Dr. Mary K. Scott, Pursuit and Executive VP Suite:
Street: 1530 CONCORDIA WEST City: IRVINE State: CA Zip: 92612
Country: U.S.A. Telephone Number (including country or area code): 949.214.3201

For officers 2 or more, add pages as needed.

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(13) For a for-profit institution, provide the names and business addresses of persons owning more than 10% of the school: [(261B.4(6))]

Name: Suite: Street: N/A City: State: Zip: Country: Telephone Number (including country or area code):

For owners 2 or more, add pages as needed.

(14) Name all agencies accrediting the institution and programs offered in Iowa that are recognized by the U.S. Department of Education. [(261B.4(9))] Attach a copy of the school's accreditation status for each agency. Provide all documentation in the school's records about any pending or final accrediting agency sanction.

If the school is applying to initiate in-person instruction at an Iowa location and the school's accrediting agency has not approved the Iowa location, provided either: 1) documentation from the accrediting agency that its approval is not required, or 2) documentation that the accrediting agency will not consider the school's approval request until the Commission approves the school to operate in Iowa.

Accrediting Agency 1 Name: WASC Western Association of Schools and Colleges Suite: Street: 593 Airport Boulevard City: Berkeley State: CA Zip: 94710 or 485 Atlantic Avenue, Suite 100 Alameda, CA 94501 Country: U.S.A. Telephone Number (including country or area code): 510.748.7501 Contact Person: David Brown, Executive Director

Accrediting Agency 2 Name: Suite: Street: N/A City: State: Zip: Country: Telephone Number (including country or area code): Contact Person:

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3/6/2015

Mail - Iowa registration for Concordia/Irvine has expired

along with the completed registration application that is fine, and actually I'd prefer that. There is no fee payable to the Commission for filing evidence of financial responsibility.

Talk to you on Monday next, 2:30 my time, 12:30 yours!

J. Carolyn Small

Iowa Postsecondary Registration Coordinator

Iowa College Student Aid Commission

NEW ADDRESS as of June 3, 2013: 430 E. Grand Ave. 3rd floor

Des Moines, IA 50309

515 725 3413 (voice)

515 725 3401 (fax)

3 attachments

- ✓  Registration Approval Jan 2013.pdf
46K
- ✓  2014 Nov 261B application fillable.pdf
1455K
- ✓  714 Financial Responsibility Filing or Exemption Claim rev 031814.pdf
451K

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Accrediting Agency 3
Name:

N/A

Suite:

Street:

City:

State:

Zip:

Country:

Telephone Number (including country or area code):

Contact Person:

For additional accrediting agencies, add additional pages.

(15) Describe the procedures followed by the school for safeguarding (e.g., storage, security and back-up processes) and preservation of student records. [(261B,4(12))]

Physical records for each student are stored by the
Registration office in a secure location. Since 2002 students
also have an electronic record in addition to the paper file.
Both types of records are kept in perpetuity.

(16) Provide the contact information to be used by students and graduates who seek to obtain transcript information.

Name: Office of the Registrar

Suite: GRINN HALL - 105 B

Street: 1530 CONCORDIA WEST City: IRVINE

State: CA

Zip: 92612

Country: U.S.A.

Telephone Number (including country or area code):

949-214-3082

E-mail address and/or web site:

www.cmu.edu

(17) List the states and licensure/authorization agencies for all states that require the school to obtain authorization to operate, maintain a presence, or offer distance education in that state. Attach documentation of the school's licensure/authorization status in each state. Do not list states in which the school's status is "exempt."

	State	Agency Name
Add Row	CALIFORNIA	Secretary of State Office 1500 11th St Sacramento, CA 95834 916.653.6214
Delete Row		

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(18) Has a state ever revoked the school's approval to operate in that state?

No Yes. If yes, attach documentation from the state of its revocation action.

(19) Has a state sanctioned the school within the year prior to the date of this application?

No Yes. If yes, attach documentation from the state of its sanction action.

(20) Is the school presently under investigation by or bound to the terms of a judgment issued by a state's attorney general or other enforcement authority?

No Yes. If yes, attach documentation of the investigation or judgment from the enforcement authority.

(21) Will the school certify that it will immediately notify the Commission of any pending or final sanction issued by the school's accrediting agency, another state agency that registers or licenses the school during its Iowa registration term, or a state attorney general's office or other enforcement authority?

Yes No

(22) Describe the academic and instructional methodologies and delivery systems to be used by the school and the extent to which the school anticipates each methodology and delivery system will be used, including, but not limited to, classroom instruction, correspondence, internet, electronic telecommunications, independent study, and portfolio experience evaluation. [261B.4(13)]

- see link (website)

(23) Is the school subject to a limitation, suspension or termination (LST) order issued by the U.S. Department of Education?

Yes No

Please attach a copy of the school's current Federal Student Aid Program Participation Agreement with the U.S. Department of Education.

- see link (Director of Finance #10)

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(24) Do you currently:

Enroll students in Iowa? No Yes. How many?

Employ Iowa faculty? No Yes. How many full-time? How many part-time?

Provide the name(s) of and business contact information for any Iowa resident that the school compensates to provide instruction or academic supervision in the programs its offers in Iowa.

(25) Do you compensate Iowa residents to perform other operational activities for the school besides teaching (e.g., program or Iowa site coordinator, call-taker, admissions representative)?

No Yes. How many? How many full-time? How many part-time?

Provide the names, titles, and business contact information for all Iowa residents that the school compensates to provide operational support other than teaching. Attach a resume, other documentation, or provide a link to the school's Internet site that provides a curriculum vitae summary for each Iowa resident employee.

(26) Of the total number of faculty (including those that may not be Iowa residents) who will provide instruction in programs offered to Iowa residents, how many are full-time? How many are part-time?

Attach resumes, other documentation, or links to your Internet site that describe 1) the educational and experiential qualifications of all faculty or instructors who teach the courses offered to Iowans, and 2) the general subject matter in which they teach. *SEE LINK*

(27) How will your school comply with Iowa Code section 261B.7, which requires the school to disclose: 1) that it is registered by the Commission, and 2) the Commission's contact information for student questions or complaints? *MOHA HANDBOOK*

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(28) Will your school comply with the requirements of Iowa Code Section 261.9(1)"e" to "h"?

Yes No

Note: Schools that apply for registration to offer distance education programs and who have no compensated parties working remotely for the school from an Iowa location are not required to comply with Iowa Code Section 261.9(1)"h". For more information about Iowa Code Section 261.9(1), please contact the Postsecondary Registration Coordinator or see the Postsecondary Registration/Authorization tab on the Commission's main web page at www.iowacollegeaid.gov.

You must attach policies that are ready for implementation upon registration approval and that comply with these requirements.

(29) Does the school agree to file annual reports that the Commission requires from all Iowa Colleges and Universities? (Note: at this time the Commission does not require annual reports for out-of-state distance education program providers.)

Yes No

(30) Attach a copy of the applicant school's most recent independent audit report prepared by a certified public accounting firm no more than 12 months prior to the application and state below where, in the audit report, there is evidence that the auditor is providing an unqualified opinion. *see included audit report FY14*

Note: A school may submit to the Postsecondary Registration Coordinator financial statements associated with an independent audit in a separate electronic file that is marked "confidential." In that case, the Commission will not disclose the school's financial statements to the public.

(31) Describe how your school provides students with learning resources, including appropriate library and other support services requisite for the school's programs.

The University library is available online. The three electronic journals most applicable to this program are Sport Discus (full text) EBSCO (full text) + EBIC (full text on request) In addition a variety of other databases are available for research into current events.

(32) Provide evidence that faculty within an appropriate discipline are involved in developing and evaluating curriculum for the program(s) to be registered in Iowa.

Faculty is involved. See "MOAA Faculty and Staff" for credentials of those involved with this program

(33) If applicable, please provide evidence that the school has adequate physical facilities appropriate for the program(s) and students services to be offered and are located in the state. For a school that applies for registration to open a fixed instructional site, include a copy of a signed agreement for a facility purchase or lease or option to purchase or lease.

Electronic infrastructure support for the course management program system Blackboard is provided through a contract with Blackboard. This provides 99% uptime of the system as well as sufficient bandwidth for all students. Internally, we provide help desk support via phone or email. Since courses are offered online, no specialized equipment or facilities are required. The program's presence on campus consists of the staff administering it and the full-time faculty who teach.

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Loc

(34) For a for-profit institution, provide an organizational plan that shows the physical address and contact information for all internet-based and site-based educational locations, administrative, and service centers operated by the applicant and any parent organization.

N/A

(35) Provide documentation showing the school's policy for the resolution of student and graduate comments and complaints. Provide complete contact information to which complainants may be referred.

. See LINK of Student Services

(36) Provide the most recent official Stafford loan cohort default rate that the U.S. Department of Education reports for the school. If the school has multiple campuses and is applying for distance education programs, report the cohort default rate for the campus that supports the school's online programs.

3.7% default rate

37) Provide the average loan debt upon graduation of individuals completing programs at your institution.

(38) Provide the graduation rate for each branch location that the school reports to the U. S. Department of Education National Center for Education Statistics. If the school had multiple campuses for which it reports a graduation rate and is applying for distance education programs, report the graduation rate for the campus that supports the schools online programs.

63%

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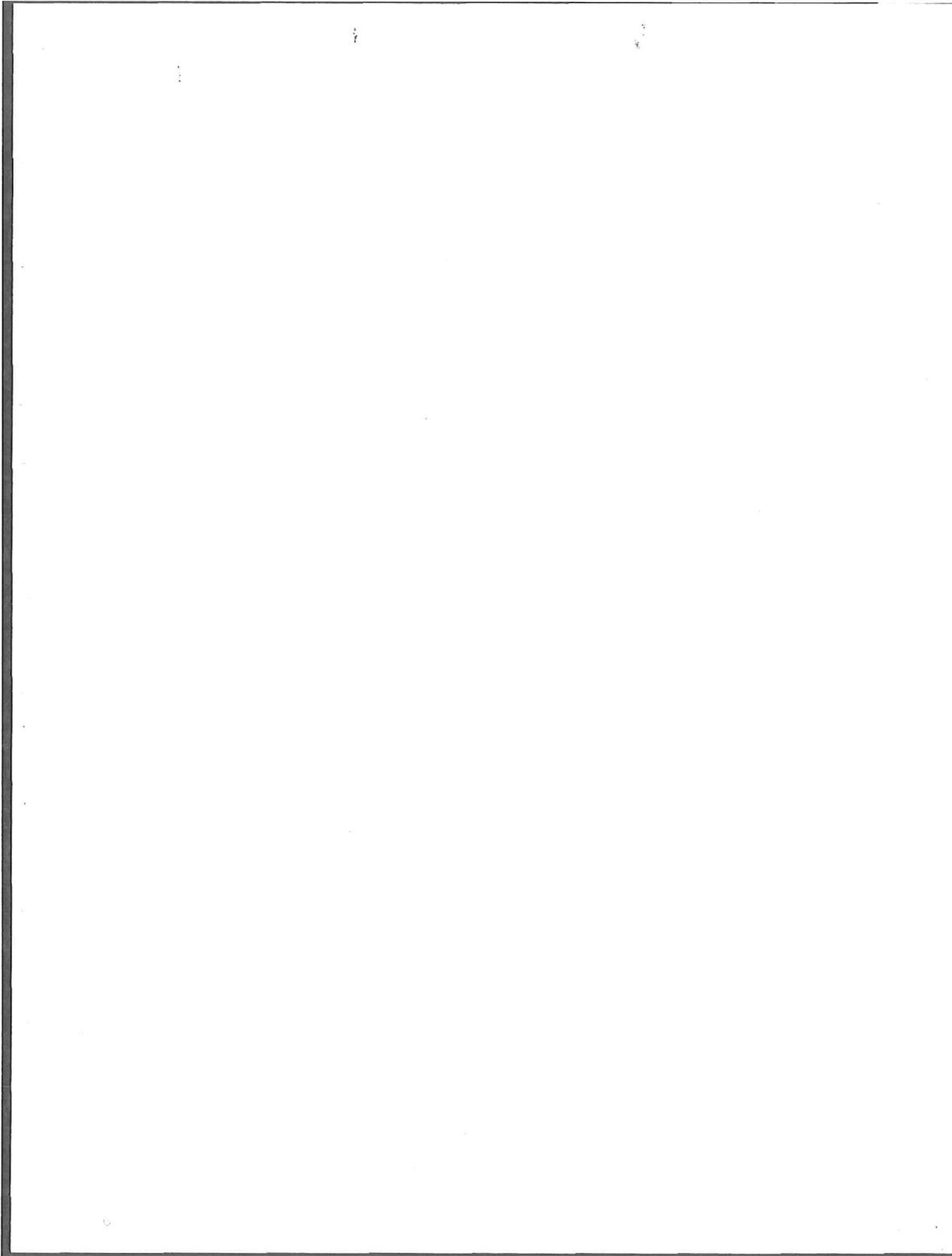
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Item 13
Front Image

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SIGNATURE

Applicant School Chief Executive Officer

KURT J. KRUEGER

Name

Signature

[Handwritten Signature]

President

Title

Date

4-7-2015

By my signature above, I commit to the delivery of programs my school offers in Iowa, and agree to provide alternatives for students to complete programs at other institutions if my school closes a program, or the school closes before students have completed their courses of study.

Additional Instructions:

- If any information in this application changes before the Commission considers the application the school should inform the Commission via email.
- A registration fee of \$1000 is due and payable to the State of Iowa upon registration approval.
- Registrations must be renewed every two years. During a registration term, a school must submit a written request for amendment via email and remit an additional \$1000 amendment fee upon any substantive change in program offerings, location, or accreditation.
- During a registration term, changes that occur to the information provided in this application must be submitted in writing (e-mail is acceptable) to the Postsecondary Registration Coordinator within 90 days of the change (e.g., a new program that does not require the approval of an agency of the state of Iowa).
- During a registration term, a school that offers distance education programs that include a mandatory structured field experience must notify the Commission of the Iowa field experience location within 90 days of establishing the Iowa field experience site.