

Institution: SUNY College of Optometry (196228)
 User ID: P1962281

Overview

Institutional Characteristics Overview

Welcome to the Institutional Characteristics (IC) component. This component collects important information about your institution's mission, student services, and student charges.

Much of the data reported on IC appear on College Navigator, which is updated once after IC data has been reviewed. Thus, errors may stay on College Navigator for a full year.

Additionally, the cost of attendance data are used to calculate the net price of attendance in the Student Financial Aid component. This has important implications for what students see about your institution, and also for the College Affordability and Transparency Center's lists. **Revisions or changes to costs can ONLY be made in the Student Financial Aid component and not in the prior year revision system.**

Remember, it is the responsibility of the keyholder to submit accurate data about the institution. Please contact the IPEDS Help Desk for clarifications to make sure that you are reporting correctly.

Changes to This Year's IC Component

The following changes were implemented for the 2017-18 data collection period:

- In Part C, questions about distance education opportunities have been modified.
- In Part D, instructions about student charges for cost (price) of attendance for public program reporters have been modified.

Common Errors

Quality control reviews of past IC data indicate frequently made errors. Please review the common errors below to ensure accurate reporting. Additional common errors or tips can be found in the New Keyholder Handbook under Resources.

- Part C, question 8 should only be marked 'YES' if your institution is **EXCLUSIVELY** distance education. Do not mark 'YES' if your courses/programs are also available in person.
- Do not try to outsmart fatal errors; this is falsifying data. Contact the Help Desk to override, or fix, the data.
- Make sure you understand ALL definitions before responding to questions. For example, make sure that you are reporting for an 'ACADEMIC YEAR' or 'PROGRAM' as defined by IPEDS.

To download the survey materials for this component: [Survey Materials](#)

To access your prior year data submission for this component: [Reported Data](#)

Part A - Mission Statement

1. Provide the institution's mission statement or a web address (URL) where the mission statement can be found. Typed statements are limited to 2,000 characters or less. The mission statement will be available to the public on College Navigator.

Mission Statement URL:


Please begin URL with "http://" or "https://"

Mission Statement

Part B - Services and Programs for Servicemembers and Veterans

1. Which of the following are available to veterans, military servicemembers, or their families?

- Yellow Ribbon Program (officially known as Post-9/11 GI Bill, Yellow Ribbon Program)
- Credit for military training
- Dedicated point of contact for support services for veterans, military servicemembers, and their families
- Recognized student veteran organization
- Member of Department of Defense Voluntary Educational Partnership Memorandum of Understanding
- None of the above

 You may use the space below to provide context for the data you've reported above. These context notes will be posted on the College Navigator website, and should be written to be understood by students and parents.

Part C - Student Services - Special Learning Opportunities

1. Does your institution accept any of the following? [Check all that apply]

- Dual credit (college credit earned while in high school)
- Credit for life experiences
- Advanced placement (AP) credits
- None of the above

2. What types of special learning opportunities are offered by your institution? [Check all that apply]

- ROTC
 - Army
 - Navy
 - Air Force
- Study abroad
- Weekend/evening college
- Teacher certification (for the elementary, middle school/junior high, or secondary level)

Do **not** include certifications to teach at the postsecondary level.

- Students can complete their preparation in certain areas of specialization
- Students must complete their preparation at another institution for certain areas of specialization
- This institution is approved by the state for the initial certification or licensure of teachers
- None of the above

3. If your institution grants a bachelor's degree or higher but does not offer a full 4-year program of study at the undergraduate level, how many years of completed college-level work are required for entrance?

Number of years	Three
-----------------	-------

Part C - Student Services: Other Student Services

4. Which of the following selected student services are offered by your institution? [Check all that apply]

<input type="checkbox"/>	Remedial services
<input checked="" type="checkbox"/>	Academic/career <u>counseling services</u>
<input checked="" type="checkbox"/>	Employment services for current students
<input checked="" type="checkbox"/>	Placement services for program completers
<input type="checkbox"/>	On-campus <u>day care</u> for children of students
<input type="checkbox"/>	None of the above

5. Which of the following academic library resource or service does your institution provide? [Check all that apply]

<input checked="" type="checkbox"/>	Physical facilities
<input checked="" type="checkbox"/>	 An organized collection of printed materials
<input checked="" type="checkbox"/>	Access to digital/electronic resources
<input checked="" type="checkbox"/>	A staff trained to provide and interpret library materials
<input checked="" type="checkbox"/>	Established library hours
<input checked="" type="checkbox"/>	 Access to library collections that are shared with other institutions
<input type="checkbox"/>	None of the above

6. Indicate whether or not any of the following alternative tuition plans are offered by your institution.

<input checked="" type="radio"/>	No
<input type="radio"/>	Yes
<input type="checkbox"/>	<u>Tuition guarantee</u>
<input type="checkbox"/>	<u>Prepaid tuition plan</u>
<input type="checkbox"/>	<u>Tuition payment plan</u>
<input type="checkbox"/>	Other (specify in box below)

 You may use the space below to provide context for the alternative tuition plans you've reported above. These context notes will be posted on the College Navigator website, and should be written to be understood by students and parents.

Part C - Student Services - Distance Education

7. Please indicate at what level(s) your institution does or does not offer distance education courses and/or distance education programs. Check all that apply.

	Distance education courses	Distance education programs	Does not offer Distance Education
Graduate level	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

8. Are all the programs at your institution offered exclusively via distance education programs?

<input checked="" type="radio"/> No	
<input type="radio"/> Yes	

Part D - Student Charges Questions

2. Does your institution charge different tuition for in-district, in-state, or out-of-state students?

If you answer **Yes** to this question, you will be expected to report tuition amounts for in-district, in-state, and out-of-state students.

Please only select **Yes** if you really charge different tuition rates, or you will be reporting the same numbers 3 times.

- No
 Yes

3. Does your institution offer institutionally-controlled housing (either on or off campus)?

If you answer **Yes** to this question, you will be expected to specify a housing capacity, and to report a room charge or a combined room and board charge (D10).

- No
 Yes

Specify housing capacity for academic year 2017-18

4. Do you offer board or meal plans to your students?

If you answer **Yes** to this question, you will be expected to report a board charge or combined room and board charge (D10).

- No
 Yes - Enter the number of meals per week in the maximum meal plan available
 Yes - Number of meals per week can vary (e.g., students' charge meals against a meal card)

Part D - Graduate Student Charges

If the institution charges an application fee, indicate the amount.

	Amount	Prior year
Graduate application fee	75	75

*Please do not include tuition for Doctor's Degree – Professional Practice programs.
 Data for those programs are collected separately.*

7. Charges to full-time graduate students for the full academic year 2017-18

	In-district	Prior year	In-state	Prior year	Out-of-state	Prior year
Average tuition	10,870	10,870	10,870	10,870	22,210	22,210
Required fees	1,809	1,800	1,809	1,800	1,809	1,800

8. Per credit hour charge for part-time graduate students

	In-district	Prior year	In-state	Prior year	Out-of-state	Prior year
Per credit hour charge	453	453	453	453	925	925

Part D - Student Charges - Graduate, Doctor's Professional Practice Tuition

9. List the typical tuition and required fees for a full-time doctor's-professional practice student in any of the selected programs for the full academic year 2017-18.

DO NOT include room and board charges

Doctor's degree-professional practice	In-state	Out-of-state
1. Chiropractic (D.C. or D.C.M.):		
Tuition amount		
Required fees		
2. Dentistry (D.D.S. or D.M.D.):		
Tuition amount		
Required fees		
3. Medicine (M.D.):		
Tuition amount		
Required fees		
4. Optometry (O.D.):		
Tuition amount	28,390	49,650
Required fees	660	660
5. Osteopathic Medicine (D.O.):		
Tuition amount		
Required fees		
6. Pharmacy (Pharm.D.):		
Tuition amount		
Required fees		
7. Podiatry (Pod.D., D.P., or D.P.M.):		
Tuition amount		
Required fees		
8. Veterinary Medicine (D.V.M.):		
Tuition amount		
Required fees		
9. Law (J.D.):		
Tuition amount		
Required fees		

Part E - Athletic Association

1. Is this institution a member of a national athletic association?

<input checked="" type="radio"/>	No
<input type="radio"/>	Yes - Check all that apply
<input type="checkbox"/>	National Collegiate Athletic Association (NCAA)
<input type="checkbox"/>	National Association of Intercollegiate Athletics (NAIA)
<input type="checkbox"/>	National Junior College Athletic Association (NJCAA)
<input type="checkbox"/>	United States Collegiate Athletic Association (USCAA)
<input type="checkbox"/>	National Christian College Athletic Association (NCCAA)
<input type="checkbox"/>	Other

2. If this institution is a member of the NCAA or NAIA, specify the conference FOR EACH SPORT using the pull down menu.

Sport	NCAA or NAIA member		Conference
Football	<input checked="" type="radio"/> No	<input type="radio"/> Yes-Specify	Select One
Basketball	<input checked="" type="radio"/> No	<input type="radio"/> Yes-Specify	Select One
Baseball	<input checked="" type="radio"/> No	<input type="radio"/> Yes-Specify	Select One
Cross country and/or track	<input checked="" type="radio"/> No	<input type="radio"/> Yes-Specify	Select One

Prepared by

The name of the preparer is being collected so that we can follow up with the appropriate person in the event that there are questions concerning the data. The Keyholder will be copied on all email correspondence to other preparers.

The time it took to prepare this component is being collected so that we can continue to improve our estimate of the reporting burden associated with IPEDS. Please include in your estimate the time it took for you to review instructions, query and search data sources, complete and review the component, and submit the data through the Data Collection System.

Thank you for your assistance.

This survey component was prepared by:

<input checked="" type="radio"/> Keyholder	<input type="radio"/> SFA Contact	<input type="radio"/> HR Contact
<input type="radio"/> Finance Contact	<input type="radio"/> Academic Library Contact	<input type="radio"/> Other
Name: Steven Schwartz		
Email: sschwartz@sunyopt.edu		

How many staff from your institution only were involved in the data collection and reporting process of this survey component?

2.00	Number of Staff (including yourself)
------	--------------------------------------

How many hours did you and others from your institution only spend on each of the steps below when responding to this survey component?

Exclude the hours spent collecting data for state and other reporting purposes.

Staff member	Collecting Data Needed	Revising Data to Match IPEDS Requirements	Entering Data	Revising and Locking Data
Your office	0.25 hours	hours	0.25 hours	0.50 hours
Other offices	hours	hours	hours	hours

Summary**Institutional Characteristics Component Summary
Academic Year Reporters**

IPEDS collects important information regarding your institution. All data reported in IPEDS survey components become available in the IPEDS Data Center and appear as aggregated data in various Department of Education reports. Additionally, some of the reported data appears specifically for your institution through the College Navigator website and is included in your institution's Data Feedback Report (DFR). The purpose of this summary is to provide you an opportunity to view some of the data that, when accepted through the IPEDS quality control process, will appear on the College Navigator website and/or your DFR. College Navigator is updated approximately three months after the data collection period closes and Data Feedback Reports will be available through the [Data Center](#) and sent to your institution's CEO in November 2017.

Please review your data for accuracy. If you have questions about the data displayed below after reviewing the data reported on the survey screens, please contact the IPEDS Help Desk at: 1-877-225-2568 or ipedshelp@rti.org.

GENERAL INFORMATION

Mission Statement	http://www.sunyopt.edu/about/history-and-mission
Are all the programs at your institution offered exclusively via distance education programs?	No
Special Learning Opportunities	Study abroad
Student Services	Academic/career counseling services Employment services for current students Placement services for program completers
Credit Accepted	N/A

PRICING INFORMATION

Average graduate student tuition and fees for academic year 2017-18		Tuition	Fees
<input type="checkbox"/>	In-district	\$10,870	\$1,809
<input type="checkbox"/>	In-state	\$10,870	\$1,809
<input type="checkbox"/>	Out-of-state	\$22,210	\$1,809
Alternative tuition plans		N/A	

Institutional Characteristics

SUNY College of Optometry (196228)

There are no errors for the selected survey and institution.