College Affordability and Transparency Explanation Form

The following PRA statement will be visible on the log-in page

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1840–[XXXX]. The time required to complete this information is estimated to average 3 hours per institution, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate or suggestions for improving this collection, please write to: U.S. Department of Education, Washington, DC 20202–4537. If you have any comments or concerns regarding the status of your individual submission of this information, write directly to: College Affordability and Transparency Explanation Form, Office for Postsecondary Education, 1990 K Street, NW, Washington, DC 20006.

College Affordability and Transparency Explanation Form

Section 1: General information

Your institution has been identified as one whose increases over the most recent three academic years for which data are available in tuition and fees, or net price after grant and scholarship aid, fell in the top five percent within your sector. Therefore, you were included on one of the lists that were posted at on June 30, 2011, at http://collegecost.ed.gov/catc/Default.aspx. According to the Higher Education Opportunity Act, Section 111, Part C, all institutions included on the highest increase lists are required to provide additional information to the Secretary of Education regarding costs at your institution to help explain why charges to students are increasing at the rate they are. Please complete the form below. You must complete the information below by xxxx, 2012.

IPEDS UnitID [Name of institution will be nulled in based on IPEDS UnitID]

[Name of institution will be pulled in based on IPEDS UnitI	D]
2. Contact information for person filling out the form if other	than IPEDS keyholder:
a) Name	
b) Position	
c) Phone number	
d) E-mail address	

3. Was the three-year increase in tuition and fees and/or net prices due to your institution reporting inaccurate data to IPEDS?			
○No	○ Yes		
describe the steps that	have been put in place to i	mprove the reporting of accurate data to	
For institutions on the I	net prices increase list <i>onl</i> y	, was the three-year increase in net prices	
the result of an institut price?	ional change in the method	dology used to calculate the data for net	
○No	○ Yes		
provide a detailed explained well as the differences and the one more received.	anation of why the institut between the previous met ntly used. This response wi	ion changed the methodology utilized, as hodology used for the net price calculation ill be reviewed by staff once it is	
	For institutions on the result of an institutionice? No If you answered "No", to describe the steps that IPEDS in a timely manner. For institutions on the result of an institutionice? No If you answered "No", to provide a detailed explayed as the differences and the one more received.	reporting inaccurate data to IPEDS? No Yes If you answered "No", then please skip to Section describe the steps that have been put in place to i IPEDS in a timely manner; this is the last question. For institutions on the net prices increase list only the result of an institutional change in the method price?	

Section 2: Cost increase description

Section 2: Cost increase description

A. Please check the boxes that best describe the *five* major areas in your institution's budget with the greatest cost (expenses) increases over the three-year period. Once you have checked a box, please indicate the total dollar amount for each cost area for the first and last year of the three-year period. The three-year percent change will be calculated for you. You will have to provide more information about these expenses in the following screens.

Cost area (definition will pop-up when clicked on)	Check box	<u>Year 1</u> Amount	<u>Year 3</u> Amount	<u>3-year</u> <u>%</u> change
Administrative and managerial salaries				
Auxiliary enterprises				
Debt service				
Faculty salaries				
Health benefits				
Information technology				
Institutional student grant aid				
Intercollegiate athletics				
Marketing and advertising				
Research				
Retirement benefits				
Student services				
Travel				
Utilities				
Other				

At least one box above must be checked before you will be able to fill out the next section. If there have been no cost increases, then indicate the budget areas with no change or the lowest decreases. These data will be compared against your previously reported IPEDS Finance data to ensure that your institution has not increased spending in any area.

Your institution's FTE student enrollment counts for the first and last year of the three-year period have been carried over from IPEDS and will be used to calculate the per FTE student dollar amounts and the resulting percent change for those amounts for the cost areas indicated in the previous section. If you would like to

provide information on how the change in FTE student enrollment has impacted student tuition and fees or net price, please do so in the "Additional Information" box at the end of Section 5.

FTE student enrollment	Year 1 Amount	Year 3 Amount	3-year % change	
Cost area per FTE student	Year 1 Amount	Year 3 Amount	3-year % change per FTE	
Administrative and managerial salaries				
Auxiliary enterprises				
Debt service				
Faculty salaries				
Health benefits				
Information technology				
Institutional student grant aid				
Intercollegiate athletics				
Marketing and advertising				
Research				
Retirement benefits				
Student services				
Travel				
Utilities				
Other				

B. If, in addition to the increased in expenses indicated above, your institution's budget has had decreases in major sources of revenue over the three-year time period that have impacted charges to students, please check the boxes that best describe those affected revenue sources (check all that

apply). Once you have checked a box, please indicate the total dollar amount for each revenue area for the first and last year of the three-year period. The three-year percent change will be calculated for you. If you would like to provide an explanation for the decreases in revenues please do so in the "Additional Information" box at the end of Section 5.

Revenue source (definition will pop-up when clicked on)	Check box	<u>Year 1</u> <u>Amount</u>	<u>Year 3</u> <u>Amount</u>	3-year % change
Endowment transfer to operating budget				
Federal sources				
Local appropriations				
Private gifts, grants, and contracts				
State appropriations				
Other				
Amounts for revenues per FTE student enrolln tudent amounts will be calculated using the value of the student source per FTE student (definite pop-up when clicked on)	alues enter		Year 3 Amount	3-year % change per FTE
Endowment transfer to operating budget				
Federal sources				
Local appropriations				
Private gifts, grants, and contracts				
State appropriations				
Other Section 3:	Cost increas	se explanation		

Section 3: Cost increase explanation

Please provide an explanation for each of the **cost increases** indicated in Section 2A.

Cost area A: (these will	l populate based on checkboxes in 2A)	
Cost area B:		
Cost area B:		
Cost area C:		
Cost area D:		
Cast succ F		
Cost area E:		
	Section 4: Cost reductions	
1		

Describe the steps your institution has taken or will take toward the goal of reducing costs in the areas described in Section 2A. If your institution does not plan on reducing the costs, please explain why not.

If the institution has been on the tuition and fees/net price increase college affordability list for two or more consecutive years, please describe the progress made on the steps to reduce costs that were provided on this form last year. (*This will not appear until the 2nd annual collection.)

Cost area A: (the	e will populate based on checkboxes in 2A)
Cost area B:	
Cost area C:	
Cost area D:	
Cost area E:	
	Section5: Control of cost increases

Section 5: Control of student charges:

Are stu	ıden	t charges (tuition and fee	e rates) within the exclusive control of the institution?	
		ONo	○ Yes	
If "No"	is se	elected then the user wil	I have to enter the information in the boxes below.	
	A) identify the agency or agencies responsible for determining the tuition and fe			
		provide an explanation tuition and fee increase	of the extent to which the institution participates in determining	
tuition	and	fees or net prices charge	y other information your institution considers relevant to increases in ed to students at your institution. Information on how changes in charges should be included here.	

Section 6: Burden Estimate

Did you find the estimated burden amount of 3 hours to be accurate for this survey?			
O No Yes			
If "No" is selected then the user will have to answer the following question:			
How long did it take you to complete this survey?			