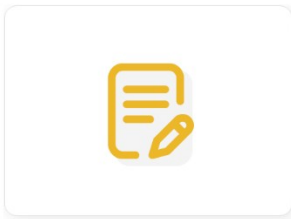




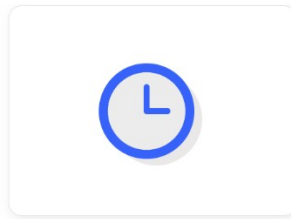
# College Affordability and Transparency Explanation Form

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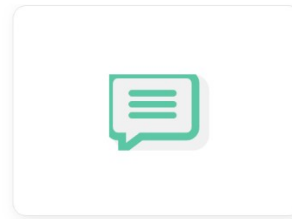
### OMB Control Number

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1840-0822.



### Time Requirement

Public reporting burden for this collection of information is estimated to average 2.3 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is mandatory (§132 of the Higher Education Act of 1965 as amended (HEA), 20 U.S.C. §1015a).



### Comments & Suggestions

If you have any comments concerning the accuracy of the time estimate, suggestions for improving this individual collection, or if you have comments or concerns regarding the status of your individual form, application or survey, please contact U.S. Department of Education, Office of Postsecondary Education, Freddie Cross at [Freddie.cross@ed.gov](mailto:Freddie.cross@ed.gov) directly.

## Need CATEF Help ?

If you have any comments or concerns regarding the status of your individual submission of this information, contact the CATEF Help Desk



(888) 288-6131



[catef@inovas.net](mailto:catef@inovas.net)



## College Affordability and Transparency Explanation Form

Original Password:

New Password:

Confirm Password:

Save

Before you proceed, please create a new password. The new password must conform to the following rules:

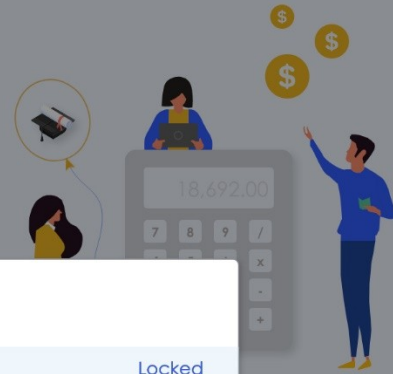
- Must be between eight and fourteen characters long
- Must contain at least one upper case character (A, B, C ...)
- Must contain at least one lower case character (a, b, c...)
- Must contain at least one numeric character (1, 2, 3 ...)
- Must contain at least one special character (!, @, #, \$, %, ^, & or \*)

[Back to Login Page](#)



# College Affordability and Transparency Explanation Form

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**Select Institution**

110547 - Example College (Tuition and Fees)	Locked
110547 - Example College (Tuition and Fees)	Locked
110547 - Example College (Tuition and Fees)	Incomplete
110547 - Example College (Tuition and Fees)	Incomplete
110547 - Example College (Tuition and Fees)	Incomplete

### OMB Control Number

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 1840-0822.

### Time Requirement

The time required to complete this information is estimated to average 3.27 hours per institution, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

### Comments & Suggestions

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.

## Need CATEF Help ?

If you have any comments or concerns regarding the status of your individual submission of this information, contact the CATEF Help Desk



(888) 288-6131



catef@inovas.net



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[Department of Education's College Affordability and Transparency Page.](#)

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CATEF Help Desk toll-free at [\(888\) 268-8131](tel:8882688131) or via e-mail [catef@inovas.net](mailto:catef@inovas.net)

[Back to Last Page](#)



Sections

Summary Screen



## 110547 - Example College (Tuition and Fees)

### Section 1 - General Information

Your institution has been identified as one whose increases in tuition and fees, or net price after grant and scholarship aid, over the most recent three academic years for which data are available fell in the top five percent within your sector. Therefore, you were included on one of the lists that were posted at <http://collegecost.ed.gov/catc/>, on June 30, 2017. According to section 132(e) of the Higher Education Act of 1965, as amended, all institutions included on the highest increase lists are required to provide additional information to the Secretary of Education.

Please complete the following form, which collects information regarding costs at your institution. You must complete this form no later than September 29, 2018.

#### **Contact Information for person filling out the form if other than preloaded IPEDS Keyholder<sup>①</sup>**

\* - field is required

**First name \***

**Last Name \***

**Position \***

**Phone Number \***

**E-Mail Address \***

**Next**



Sections

Summary Screen

- 1 — 2 — 3 — 4 — 5 — 6

**110547 - Example College (Tuition and Fees)**

**Section 2 - Cost Area**

Data that your institution reported as expenses in the IPEDS Finance (F) component in 2015-16 and 2017-18 have been carried forward below. The three-year percentage change has been calculated for you and the cost areas with the greatest increases have been highlighted.

Your institution's full-time equivalent (FTE) student enrollment<sup>1</sup> counts for the first and last year of the three-year period have also been carried over from the IPEDS 12-month Enrollment Component (E12). The three-year percentage change has also been calculated for you.

If you have questions about the data presented in this section, please contact the IPEDS Keyholder at your institution.

Please select up to 3 cost areas listed below that contributed the most to the increase.

Cost Area (Based on IPEDS Finance component Expenses in Part E)	2015-16 Total Amount	2017-18 Total Amount	3-Year % Change
<input type="checkbox"/> <u>Instruction</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Research</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Public Service</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Academic Support</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Student Services</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Institutional Support</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Auxiliary Enterprises</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Net Grant Aid to Students</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Scholarship and fellowships expenses, excluding discounts &amp; allowances</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Hospital services</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Independent operations</u>	\$3,506,627	\$2,593,041	-26%
<input type="checkbox"/> <u>Other expenses &amp; deductions</u>	\$3,506,627	\$2,593,041	-26%
FTE student enrollment from E12	417	278	-26%

Previous

Next



Sections

Summary Screen



### 110547 - Example College (Tuition and Fees)

#### Section 3 - Cost Increase Description

Between Year 1 and Year 3 your institution's cost area 1 has increased XX%, cost area 2 has increased XX%, cost area 3 has increased XX%. Please select up to 3 of the reasons listed below that contributed the most to the increase:

**Institutional Areas:**

- |   |  |
|---|--|
| <input type="checkbox"/> Added Programs               | <input type="checkbox"/> Added Staff                     |
| <input type="checkbox"/> Benefits                     | <input type="checkbox"/> Change in Reporting Methodology |
| <input type="checkbox"/> Increased Enrollment         | <input type="checkbox"/> Increased Operational Costs     |
| <input type="checkbox"/> Purchased Supplies/Equipment | <input type="checkbox"/> Reporting Error                 |
| <input type="checkbox"/> Salaries and Wages           |  |

**Academic Support, Student Services and Institutional Support:**

- |   |  |
|---|--|
| <input type="checkbox"/> Increased Institutional Grants | <input type="checkbox"/> Increased Eligibility |
| <input type="checkbox"/> Scholarships/Financial Aid     | <input type="checkbox"/> 0% Increase           |

Does your institution has explanation about these reasons?

- Yes     No

**Auxiliary Enterprises:**

- |  |  |
|--|--|
| <input type="checkbox"/> Repairs and Maintenance | <input type="checkbox"/> Operation and Maintenance |
| <input type="checkbox"/> Contracted Services     | <input type="checkbox"/> Renovations               |
| <input type="checkbox"/> Athletics               | <input type="checkbox"/> Bookstore                 |
| <input type="checkbox"/> Capital Projects        | <input type="checkbox"/> Depreciation and Interest |
| <input type="checkbox"/> Food Services           | <input type="checkbox"/> Student Housing           |

Does your institution has explanation about these reasons?

- Yes     No

**Institutional Support:**

- |  |  |
|--|--|
| <input type="checkbox"/> Grants                    | <input type="checkbox"/> Added Campus                    |
| <input type="checkbox"/> Repairs and Maintenance   | <input type="checkbox"/> Renovations                     |
| <input type="checkbox"/> Other                     | <input type="checkbox"/> New to Title IV                 |
| <input type="checkbox"/> Bad Debt                  | <input type="checkbox"/> Contracted Services             |
| <input type="checkbox"/> Operation and Maintenance | <input type="checkbox"/> Capital Projects                |
| <input type="checkbox"/> Depreciation and Interest | <input type="checkbox"/> Tech Investments/infrastructure |

Does your institution has explanation about these reasons?

- Yes     No

Previous

Next



Sections

Summary Screen

- 1 — 2 — 3 — 4 — 5 — 6

### 110547 - Example College (Tuition and Fees)

#### Section 3 - Cost Area

Between Year 1 and Year 3 your institution's cost area 1 has increased XX%, cost area 2 has increased XX%, cost area 3 has increased XX%.

**Instruction:**

- |  |  |
|--|--|
| <input type="checkbox"/> New Degree Levels         | <input type="checkbox"/> Physical Expansion                |
| <input type="checkbox"/> Capital Projects          | <input type="checkbox"/> Renovations                       |
| <input type="checkbox"/> Decreased Enrollment      | <input type="checkbox"/> Professional Development/Training |
| <input type="checkbox"/> Added Campus              | <input type="checkbox"/> Curriculum Development            |
| <input type="checkbox"/> Higher Credentialed Staff | <input type="checkbox"/> Tech Investments/Infrastructure   |
| <input type="checkbox"/> New to Title IV           |  |

Does your institution has explanation about these reasons?

- Yes  No

**Research and Public Service:**

- |                                      |                                 |
|--------------------------------------|---------------------------------|
| <input type="checkbox"/> 0% Increase | <input type="checkbox"/> Grants |
| <input type="checkbox"/> Other       |                                 |

Does your institution has explanation about these reasons?

- Yes  No

**Other Expenses & Deductions:**

- |  |  |
|--|--|
| <input type="checkbox"/> Repairs and Maintenance | <input type="checkbox"/> Depreciation and Interest |
| <input type="checkbox"/> Capital Projects        | <input type="checkbox"/> Other                     |

Does your institution has explanation about these reasons?

- Yes  No

**Grants, Scholarships and Fellowships:**

- |   |  |
|---|--|
| <input type="checkbox"/> Increased Institutional Grants | <input type="checkbox"/> Increased Eligibility |
| <input type="checkbox"/> Scholarships/Financial Aid     | <input type="checkbox"/> 0% Increase           |

Does your institution has explanation about these reasons?

- Yes  No

**Hospital Services:**

- |  |   |
|--|---|
| <input type="checkbox"/> Change in Reporting Methodology | <input type="checkbox"/> Merged                       |
| <input type="checkbox"/> Tech Investments/Infrastructure | <input type="checkbox"/> Added Campus                 |
| <input type="checkbox"/> Added Programs                  | <input type="checkbox"/> Added Staff                  |
| <input type="checkbox"/> Benefits                        | <input type="checkbox"/> Purchased Supplies/Equipment |
| <input type="checkbox"/> Salaries and Wages              | <input type="checkbox"/> Other                        |

Does your institution has explanation about these reasons?

- Yes  No

**Independent Operations:**

- |  |  |
|--|--|
| <input type="checkbox"/> 0% Increase         | <input type="checkbox"/> Change in Reporting Methodology |
| <input type="checkbox"/> Contracted Services | <input type="checkbox"/> Grants                          |
| <input type="checkbox"/> Natural Disaster    | <input type="checkbox"/> Relocated                       |
| <input type="checkbox"/> Reporting Error     | <input type="checkbox"/> Reporting Error                 |
| <input type="checkbox"/> Other               |  |

Does your institution has explanation about these reasons?

- Yes  No

Previous

Next





Sections

Summary Screen



## 110547 - Example College (Tuition and Fees)

### Section 4 - Steps Towards Cost Reduction

Does your institution have/Has your institution implemented any plans to decrease the cost of attendance at your institution ? \*

Yes  No

**▲** Your institution has been on the Net Price/Tuition and Fees 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.

Does your institution have/Has your institution implemented any plans to decrease the cost of attendance at your institution ? \*

Yes  No

Previous

Next



**Sections**

**Summary Screen**



### 110547 - Example College (Tuition and Fees)

#### Section 4 - Steps Towards Cost Reduction

Does your institution have/Has your institution implemented any plans to decrease the cost of attendance at your institution ? \*

- Yes       No

Your answer is Yes. Please describe any plans your institution has taken or will take to decrease the cost of attendance at your institution. \*

**⚠** Your institution has been on the Net Price/Tuition and Fees 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.

Does your institution have/Has your institution implemented any plans to decrease the cost of attendance at your institution ? \*

- Yes       No

**Previous**

**Next**



Sections

Summary Screen



## 110547 - Example College (Tuition and Fees)

### Section 4 - Steps Towards Cost Reduction

Does your institution have/Has your institution implemented any plans to decrease the cost of attendance at your institution ? \*

Yes  No

Your answer is No. Please describe any plans your institution has taken or will take to decrease the cost of attendance at your institution. \*

**▲** Your institution has been on the Net Price/Tuition and Fees 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.

Does your institution have/Has your institution implemented any plans to decrease the cost of attendance at your institution ? \*

Yes  No

Previous

Next



Sections

Summary Screen



## 110547 - Example College (Tuition and Fees)

### Section 5 - Control of Student Charges

Are student charges (tuition and fee rates) within the exclusive control of the institution? \*

Yes  No

Previous

Next



Sections

Summary Screen



## 110547 - Example College (Tuition and Fees)

### Section 5 - Control of Student Charges

Are student charges (tuition and fee rates) within the exclusive control of the institution? \*

Yes  No

Your answer is No. Please explain the questions below.

A) Identify the agency or agencies responsible for determining the tuition and fee increases \*

B) Provide an explanation of the extent to which the institution participates in determining the tuition and fee increases \*

**Additional Information:** Please use this box to provide any other information your institution considers relevant to increases in net prices charged to students at your institution.

Previous

Next



Sections

Summary Screen



## 110547 - Example College (Tuition and Fees)

### Section 5 - Control of Student Charges

Are student charges (tuition and fee rates) within the exclusive control of the institution? \*

Yes  No

Your answer is No. Please explain the questions below.

A) Identify the agency or agencies responsible for determining the tuition and fee increases \*

B) Provide an explanation of the extent to which the institution participates in determining the tuition and fee increases \*

**Additional Information:** Please use this box to provide any other information your institution considers relevant to increases in net prices charged to students at your institution.

Previous

Next



Sections

Summary Screen



## 110547 - Example College (Tuition and Fees)

### Section 6 - Burden Estimate

Did you find the estimated burden amount of 2.3 hours to be accurate for this survey ? \*

Yes  No

Your answer is No. Please enter number of hour(s):

Previous

Next



**Error**

**We are sorry!**

**The last action resulted in an error. The information about the error was stored automatically. We will investigate its cause.**

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**Back**





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[Back](#)