

Institution Name: _____

FICE Code: _____

IPEDS UnitID: _____

		In-State						Out-of-State					
		Men			Women			Men			Women		
Student Level	Line No.	Full Time (01)	Part Time (02)	FTE (03)	Full Time (04)	Part Time (05)	FTE (06)	Full Time (07)	Part Time (08)	FTE (09)	Full Time (10)	Part Time (11)	FTE (12)
First-Time Freshmen	01												
Other Freshmen	02												
Sophomore	03												
Junior	04												
Senior & 5th Yr.	05												
Spec./Unclass.	06												
Undergrad Total													
Medicine	07												
Dentistry	08												
Pharmacy	09												
Vet. Medicine	10												
Law	11												
Theology	12												
Spec./Unclass.	13												
First Prof. Total													
Master's	14												
Doctor's	15												
Spec./Unclass.	16												
Graduate Total													
Grand Total	17												
Cr.Hrs.Reg. All Levels	18												

Completed by: _____

Email: _____

Phone: _____

Fax: _____

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Student Level	Line No.	Grand Total		Cr. Hrs. Reg. by Lvl (15)	New Admissions		Other Students	
		Head Count (13)	FTE (14)		First Time (16)	New Transfers (17)	Returning (18)	Continuing (19)
First-Time Freshmen	01							
Other Freshmen	02							
Sophomore	03							
Junior	04							
Senior & 5th Yr.	05							
Spec./Unclass.	06							
Undergrad Total								
Medicine	07							
Dentistry	08							
Pharmacy	09							
Vet. Medicine	10							
Law	11							
Theology	12							
Spec./Unclass.	13							
First Prof. Total								
Master's	14							
Doctor's	15							
Spec./Unclass.	16							
Graduate Total								
Grand Total	17							
Cr.Hrs.Reg. All Levels	18							

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