## **Bureau for Private Postsecondary Education**

Annual Report data is institutional data that is combined for the main location, all satellites and all branch locations. The 2016 Annual Report Online Submission Portal has closed. Therefore, you must complete the following form, save on CD or flash drive and mail to the address listed below.

When mailing the CD or flash drive to the Bureau, ensure that the CD or flash drive only contains the Annual Report, school catalog and School Performance Fact Sheet. The documents contained on the CD or flash drive will be posted to the Bureau's website. Therefore, the institution is responsible to ensure the CD or flash drive only contains the required, compliant documents and not any documents containing confidential data. Please also ensure the CD or flash drive is clearly labeled with the institution name and institution code. The Bureau receives many CDs and flash drives; if the institution's identification information is not clearly visible, the information may not be properly identified.

#### Section #1 - Annual Report Institutions

required for the Student Tuition Recovery Fund.

Re	eport for Year 2016
1.	Institution Name? Cyber Insurance Group Corp DBA Business & Insurance S Submit one report per
	institution which includes branches and/or satellites, if applicable.
2.	Institution Code? 64494378 Enter institutional code (main location only).
3.	Street Address? 150 Paularino Ave Ste D176 (School's Physical Location)
4.	City? Costa Mesa
5.	State? CA
	Zip Code? 92626
7.	Check all that apply to this institution:  "For profit institution" "Sole Proprietor"  "Non-profit institution" "Limited Liability Corporation (LLC)"  "Publicly traded institution" "Partnership" Corporation✓_
8.	Number of Branch Locations? 1 Indicate the number of branch locations associated with the main location. If none, indicate zero ("0").
9.	Number of Satellite Locations? 2 Indicate the number of satellite locations associated with the main location or any of the branch locations. If none, indicate zero ("0").
10.	(a) Is this institution current with all assessments to the Student Tuition Recovery Fund? Yes  No  (a) Indicate "yes" if the institution has completed and submitted all quarterly assessment forms required, along with the appropriate assessment, for the Student Tuition Recovery Fund. Indicate "no" if the institution has not completed and submitted, along with the appropriate assessments, all quarterly assessment forms

	<ul> <li>(b) Is this institution current on Annual Fees? Yes</li></ul>
11.	Is your institution accredited by accrediting agency/agencies recognized by the United States  Department of Education? Yes No_ ✓ Include only full institutional approval not programmatic approval. Enter the name of the accrediting agency.  Refer to the list of accrediting agencies recognized by the United States Department of Education.
12.	If your institution has specialized accreditation from a recognized United States Department of Education approved specialized/programmatic accreditor, List the accreditation.
13.	Has any accreditation agency taken any final disciplinary action against this institution? YesNo Indicate "yes" if the institution has had final disciplinary action taken against it by an accreditation agency; Indicate "no" no final action has been taken against the institution by an accreditation agency. If Yes, please submit a paper copy of the action refer to the Annual Report Completion Check Sheet.
Fo gov	or questions 14-19 please disclose any funds received by the institution from the federal and/or state vernment to provide services to the general public.
14.	Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act? Yes No_ ✓  • What is the total amount of Title IV funds received by your institution in 2016?  N/A
15.	Does your institution participate in veteran's financial aid education programs?  Yes No  • What is the total amount of veteran's financial aid funds received by your institution in 2016? N/A
16.	• What is the total amount of Cal Grant funds received by your institution in 2016?  N/A
17.	Is your institution on the California's Eligible Training Provider List (ETPL)?  Yes No
18.	Is your institution receiving funds from the Workforce Innovation and Opportunity Act (WIOA)  Program? Yes No  What is the total amount of WIOA funds received by your institution in 2016?  \$21,000.00
	Does your Institution participate in, or offer any other government or non-governmental financial aid programs? Yes No (i.e., WIC, vocational rehab, private grants/loans, institutional grants/loans)  If yes, please provide the name of the financial aid program

20	The percentage of institutional income in 2016 that was derived from public funding.
	(Add #14, #15, #16, and #18. Divide the sum by Institution's Total Revenue) All money that is generated by the government to provide services to the general public is "public funding".
21	If your institution reports a Cohort Default Rate to the U.S. Department of Education, enter the most recent three-year cohort default rate reported to the U.S. Department of Education for this institution.  N/A  The Cohort Default Rate (CDR) represents the percentage of this institution's students that failed to make required payments on their federal loans within three years of when they were required to begin repayment of that loan.
22	The percentage of the students who attended this institution in 2016 who received federal student loans to help pay their cost of education at the school. $0\%$
23	Total number of students enrolled at this institution. O Indicate the number of students enrolled in all programs at your institution, beginning January 1 through December 31, minus the number of students who cancelled during the cancellation period.
24	Number of Doctorate Degrees Offered? O Indicate the number of Doctorate degrees the institution offered for the reporting year.
	Number of Students enrolled in Doctorate level programs at this institution? Online Indicate the number of students enrolled in all Doctorate programs at your institution; number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolling during the year (through December 31) minus the number of students who cancelled during the cancellation period.
26	Number of Master Degrees Offered? O Indicate the number of Master degrees the institution offered for the reporting year.
27.	Number of Students enrolled in Master level programs at this institution? $\frac{0}{0}$ Indicate the number of students enrolled in all Masters programs at your institution; number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolling during the year (through December 31) minus the number of students who cancelled during the cancellation period.
	Number of Bachelor Degrees Offered? Indicate the number of Bachelor degrees the institution offered for the reporting year.
	Number of Students enrolled in Bachelor programs at this institution?  Indicate the number of students enrolled in all Bachelor level programs at your institution; number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolling during the year (through December 31) minus the number of students who cancelled during the cancellation period.
30.	Number of Associate Degrees Offered? Indicate the number of associate degrees offered for the reporting year.
	Number of Students enrolled in associate programs at this institution? Indicate the number of students enrolled in all associate programs at your institution; number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolling during the year (through December 31) minus the number of students who cancelled during the cancellation period.
2.	Number of Diploma or Certificate Programs Offered? 19 Indicate the number of diploma or certificate programs offered during the reporting year.

- 33. Number of Students enrolled in diploma or certificate programs at this institution?

  Indicate the number of students enrolled in all diploma or certificate programs at your institution; Number of students at the beginning of the year (enrolled/active students as of January 1) plus the number of students enrolling during the year (through December 31) minus the number of students who cancelled during the cancellation period.
- 34. Institutions maintaining an internet web page are required to post on their homepage the most recent Annual Report submitted to the Bureau, Catalog, and School Performance Fact Sheet (CEC §94913, and 5, CCR §74117).\*\* Post the documents to your website prior to submitting the certification and provide the links to the institution's 2016 Annual Report, 2016 Catalog, and 2015/2016 School Performance Fact Sheet below.

If the institution does not maintain an internet website, leave this space blank.

Links:

If the institution maintains a website provide the link address for <u>each</u> item listed below. Items left blank will be considered incomplete.

Institution's Website: www.BusinessInsuranceSchool.com
Annual Report: www.BusinessInsuranceSchool.com
2016 Catalog: www.BusinessInsuranceSchool.com
2015/2016 School Performance Fact Sheet: www.BusinessInsuranceSchool.com

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## Section #3 - Annual Report branch locations complete one form for each branch.

If the Institution has no branch locations indicate "0" and skip to Section #4, Satellite location, if applicable. If institution does not have satellite locations skip to the check sheet.

Re	port for Year 2016
1.	Institution Name? Cyber Insurance Group Corp DBA Business & Insurance Sch Enter institution name
2.	Institution Code? 64494378 Enter institutional code (main location).
Br	anch Location (California locations only)
3.	Total number of students at this branch location? 12
4.	Name of Programs offered at this branch location? See Attached, total of 11 Programs.
	(Separate each program name with a comma). If more space is needed, please attach an explanation and clearly mark it "Name of Programs offered at this location." Include school code, school name and school location.
5.	Street Address? 150 Paularino Ave Ste D176 (Physical Location, not mailing address)
6.	City? Costa Mesa
7.	State? CA
8.	Zip Code? 92626

# Business and Insurance School School Code: 64494378 Location: 150 Pularino Ave Ste D176 Costa Mesa, CA 92626

#### Section #3

## Question #4 - Name of Programs offered at this branch location?

- Business Executive Administrator and Insurance/Agent/CSR Life, Accident and Health Education 136 Hrs
- Business Executive Administrator and Insurance/Agent/CSR Property and Casualty 232 Hrs
- Business Executive Administrator and Insurance/Agent/CSR Property and Casualty and Life, Accident and Health Education 368 Hrs
- Code and Ethics Insurance Code (In Class or Webcam) 12 Hrs
- Life Only Agent Insurance Course (In Class or Webcam) 32 Hrs
- Life, Accident and Health Agent Insurance Course (In Class or Webcam) 40 Hrs
- Life, Accident and Health Agent Insurance Course (In Class or Webcam) 52 Hrs
- Limited Lines Automobile Agent Insurance Course (In Class or Webcam) 32 Hrs
- Personal Lines Broker Agent Insurance Course (In Class or Webcam)
   32 Hrs
- Property and Casualty Broker Agent Insurance Course (In Class or Webcam) 52 Hrs
- Property and Casualty Broker Agent Insurance Course (In Class or Webcam) 40 Hrs

#4 Satellite

8. Zip Code? \_\_\_\_\_

Section #5- Annual Report branch locations complete one form for each branch.

If the Institution has no branch locations indicate "0" and skip to Section #4, Satellite location, if applicable. If institution does not have satellite locations skip to the check sheet.

Re	eport for Year 2016
1.	Institution Name? Cyber Insurance Group Corp DBA Business & Insurance Sch Enter institution name
2.	Institution Code? 64494378 Enter institutional code (main location).
Br	anch Location (California locations only)
3.	Total number of students at this branch location?
4.	Name of Programs offered at this branch location? See Attached, total of 11 Programs.
	(Separate each program name with a comma). If more space is needed, please attach an explanation and clearly mark it "Name of Programs offered at this location." Include school code, school name and school location.
5.	Street Address? 2 Locations See Attached. (Physical Location, not mailing address)
6.	City?
7.	State? CA

# Business and Insurance School School Code: 64494378

Location: 5101 E. La Palma Anaheim Hills, CA 92807

#### Section #4

#### Question #4 - Name of Programs offered at this branch location?

- Business Executive Administrator and Insurance/Agent/CSR Life, Accident and Health Education 136 Hrs
- Business Executive Administrator and Insurance/Agent/CSR Property and Casualty 232 Hrs
- Business Executive Administrator and Insurance/Agent/CSR Property and Casualty and Life, Accident and Health Education 368 Hrs
- Code and Ethics Insurance Code (In Class or Webcam) 12 Hrs
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- Limited Lines Automobile Agent Insurance Course (In Class or Webcam) 32 Hrs
- Personal Lines Broker Agent Insurance Course (In Class or Webcam)
   32 Hrs
- Property and Casualty Broker Agent Insurance Course (In Class or Webcam) 52 Hrs
- Property and Casualty Broker Agent Insurance Course (In Class or Webcam) 40 Hrs

# Business and Insurance School School Code: 64494378

Location: 600 W. Broadway Ste 345 Glendale, CA 91204

#### Section #4

#### Question #4 - Name of Programs offered at this branch location?

- Business Executive Administrator and Insurance/Agent/CSR Life, Accident and Health Education 136 Hrs
- Business Executive Administrator and Insurance/Agent/CSR Property and Casualty 232 Hrs
- Business Executive Administrator and Insurance/Agent/CSR Property and Casualty and Life, Accident and Health Education 368 Hrs
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