



CALIFORNIA  
NORTHSTATE  
UNIVERSITY

**CALIFORNIA NORTHSTATE UNIVERSITY**  
**COLLEGE OF HEALTH SCIENCES**  
**9700 West Taron Drive, Elk Grove, CA 95757**  
**Website: [www.cnsu.edu](http://www.cnsu.edu)**  
**Telephone: (916) 686-7400**

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**SCHOOL PERFORMANCE FACT SHEET**  
**CALENDAR YEARS 2014 & 2015**

**BACHELOR OF SCIENCE IN**  
**HEALTH SCIENCES PROGRAM**  
**(BS, 4 Years)**

**New Program**

This program is new. Therefore, the number of students who graduate, the number of students who are placed, or the starting salary you can earn after finishing the educational program are unknown at this time. Information regarding general salary and placement statistics may be available from government sources or from the institution, but is not equivalent to actual performance data. This program was approved by the Bureau for Private Postsecondary Education (BPPE) on 07/07/2014. As of 01/01/2021, two full years of data for this program will be available.

**Student's Initials: \_\_\_\_\_ Date: \_\_\_\_\_**

**Initial only after you have had sufficient time to read and understand the information.**

**Federal Student Loan Debt**

California Northstate University is eligible, but chooses not to participate in federal student aid programs. Therefore, students who attend this institution do not have federal student loans.

**Student's Initials: \_\_\_\_\_ Date: \_\_\_\_\_**

**Initial only after you have had sufficient time to read and understand the information.**

This fact sheet is filed with the Bureau for Private Postsecondary Education. Regardless of any information you may have relating to completion rates, placement rates, starting salaries, or license exam passage rates, this fact sheet contains the information as calculated pursuant to state law.



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## BACHELOR OF SCIENCE IN HEALTH SCIENCES PROGRAM SCHOOL PERFORMANCE FACT SHEET

Any questions a student may have regarding this fact sheet that have not been satisfactorily answered by the institution may be directed to the Bureau for Private Postsecondary Education at 2535 Capitol Oaks Drive, Suite 400, Sacramento, CA 95833, [www.bppe.ca.gov](http://www.bppe.ca.gov), toll-free telephone number (888) 370-7589 or by fax (916) 263-1897.

\_\_\_\_\_  
Student Name - Print

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Official

\_\_\_\_\_  
Date

### **STUDENT'S RIGHT TO CANCEL AND REFUND:**

You have the right to cancel this Student Enrollment Agreement until 12:01 AM on the first calendar day after the first classroom instruction session you attend (12:01 AM on September 1, 2015), or until 12:01 AM on the eighth calendar day after you sign this Enrollment Agreement, whichever is later.

If you cancel this Enrollment Agreement, the University will refund the amount of tuition that you paid, which does not include the separate \$100.00 nonrefundable enrollment fee deposit, within forty five (45) days after your Notice of Cancellation is received by the Registrar. The student health insurance premium in the estimated amount of \$3,200.00 is set by the health plan, which is an outside provider, and will not be refunded unless the health plan provides a refund and, if so, then only according to the plan's terms.

Cancellation shall occur when you give written notice of cancellation to the Registrar at the University's address shown at the top of the first page of this Enrollment Agreement. You can do this by hand delivery, email, facsimile, or mail. Written notice of cancellation sent by hand delivery, email, or facsimile is effective upon receipt by the Registrar. Written notice of cancellation sent by mail is effective when deposited in the mail properly addressed with postage prepaid.