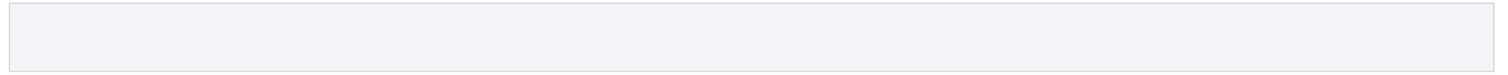


# IPE



1. Provide the institution's mission statement *or* a web address (URL) where the mission statement can be found.

1. Which of the following are available to veterans, military servicemembers, or their families?

\_\_\_\_\_

\_\_\_\_\_






9. Please indicate the percentage of all undergraduate students enrolled during Fall 2020 who were formally registered as students with disabilities with the institution's office of disability services (or the equivalent office).

- 
- 







	<span style="color: blue; font-size: 1em;">i</span>	





9. List the typical tuition and required fees for a full-time doctor's-professional-practice student in any of the selected programs for the full academic year 2021-22.

<hr/>		
<hr/>		



11. Cost of attendance for full-time, first-time undergraduate students:




1. Is this institution a member of a national athletic association?

- 
- 

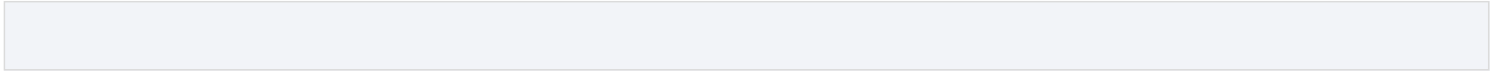
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2. If this institution is a member of the NCAA or NAIA, specify the conference FOR EACH SPORT using the









There are no errors for the selected survey and institution.