2020 Submit To BPPE

BPPE
Bureau for Private Postsecondary Education

Annual Report Submission Confirmation

Employed Security Service Center, Inc.

This is to confirm your Annual Report submission. If you have any questions, please reference the request number provided below communicating with the Bureau.

Request #: DCA-BPPE-Finalize-005492
Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

If you have any questions please contact the BPPE Annual Report Unit by email at bppe.annualreport@dca.ca.gov or by phone at (916) 574-8900, press "6" when prompted.

Request:
POST : https://bppews.dca.ca.gov/v1/batchsubmit-customer
Authorization: Bearer
eyJhbGciOiJIUzI1NiIsInR5cCI6IkpXVCJ9.eyJkZXNjcmlwdGlvbiI6ImF1dG8tZ2VuZXJhdGVkIiwiaWF0IjoxNTQ1MzI0OTU2LCJleHAiOjI0OTE0MDQ5NTYsImlzcyI6IkNBLURDQS1CUFBFIiwic3ViIjoiYXV0by1nZW5lcmF0ZWQifQ.9sU4zQgTVr34W1jiPsgP0Wim-7ZFeDOnave5493a_Bg
Content-Type: application/json

{"institutionCode": "35079813", "year": 2020}

Response:
200 OK
X-Powered-By:Express
ETag:W/"2-nOO9QiTIwXgNtWtBJezz8kv3SLc"
Date:Sat, 20 Nov 2021 21:54:39 GMT

Set-Cookie:b0333c35066163b6d9baacd414245ca5=d111def02115647c5a50b5362427f9d3; path=/; HttpOnly,
BIGipServerpool_openshift_apps_80=!tDLJNu7Gof10+7kc8QgzcGEuwk6P45kz24RaDBFhjeDrx2ud/O8K0h6E26H6N
jhnvKXZtDuLIkzxdA==; path=/; Httponly; Secure
Transfer-Encoding:chunked
Content-Type:text/html; charset=utf-8

OK

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2020 Submit To BPPE

Submit Annual Report Package to BPPE



Bureau for Private Postsecondary Education
Department of Consumer Affairs

2020 Annual Report

Submit to BPPE

(Printer Friendly Annual Report Instructions Document)
(https://www.bppe.ca.gov/annual_report/instructions.pdf)

2020 BPPE Annual Report - Submit Annual Report Package to BPPE

1. Report Year *

2020

2. Institution Code *
Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

35079813

3. Institution Name (auto-populated) *
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

Employed Security Service Center, Inc.

4. Name of Responsible Officer submitting online Annual Report? *

Musheer Rasheed

5. Responsible Officer - Phone *

(626) 482-0492

6. Responsible Officer - Email *

musheer@employedsecurity.org

7. Have you completed ONE Institution Data workflow for this Annual Report online submission? *

- (●) Yes
- ( ) No

8. Have you completed ONE Program Data workflow PER OFFERED PROGRAM for this Annual Report online submission? *

- (●) Yes
- ( ) No

9. Have you completed ONE Branch Data workflow PER BRANCH LOCATION for this Annual Report online submission? *

- ( ) Yes
- ( ) No
- (●) No Branch Locations

10. Have you completed ONE Satellite Data workflow PER SATELLITE LOCATION for this Annual Report online submission? *

- (●) Yes
- ( ) No
- ( ) No Satellite Locations

2020 Annual Report Certification

The certification must be signed by a responsible officer of the institution.

Please note that by signing this document you are assuming responsibility for the information that is contained in the Annual Report.

I certify, under penalty of perjury of the laws of the State of California, that the information and responses submitted in and with the Annual Report are true and complete to the best of my knowledge and belief.

Signature *

× Musheer Rasheed

Musheer Rasheed | Type | Draw | Upload | Clear

*

11/20/2021

Save | Submit

2020 Institution Data

BPPE
Bureau for Private Postsecondary Education

Thank You

2020 Annual Report

Institution Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Your request number is DCA-BPPE-004171.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
3. Complete submission of Branch Location Data (if applicable); OR
4. Complete submission of Satellite Location Data (if applicable); OR
5. Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.

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2020 Institution Data

2020 BPPE Annual Report - Institution - Financial

For the questions below, please disclose any funds received by the institution from the federal and/or state government to provide services to the general public.

☑ Display Instructions for #15 - #26 (Toggle)

Instructions

(Printer Friendly Annual Report Instructions Document)
(https://www.bppe.ca.gov/annual_report/instructions.pdf)

21. Provide the percentage of institutional income in the Report Year derived from public funding. (Add #15, #16, #17, and #19. 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."

23. Provide the percentage of institutional income during this reporting year derived from any non-government financial aid. All non-government financial aid divided by total revenue.

24. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable. 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.

15. Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act? (This includes federal loans and grants) *

○ Yes ◉ No

16. Does your institution participate in veterans' financial aid education programs? *

○ Yes ◉ No

17. Does your institution participate in the Cal Grant program? *

○ Yes ◉ No

18. Is your institution on California`s Eligible Training Provider List (ETPL)? *

◉ Yes ○ No

19. Is your institution receiving funds from the Work Innovation and Opportunity Act (WIOA) Program? *

◉ Yes ○ No

19a. What is the total amount of WIOA funds received by your institution in this Reporting Year? *

$ 199,400.94

20. Does your Institution participate in, or offer, any other state or federal government financial aid programs? (i.e., vocational rehab…) *

◉ Yes ○ No

20a. You indicated "Yes" for #20, please provide the name of the financial aid program below. *

Department of Rehabilitatior

20b. What is the total amount of any other state or federal funds received by your institution in the reporting year?

$ 8,940.00

21. Provide the percentage of institutional income during this Reporting Year derived from public funding. *
If none, indicate "0".

67

22. Does your Institution participate in, or offer any non-government financial aid programs? (i.e., private grants/loans, institutional grants/loans) *

○ Yes ◉ No

22a. You indicated "Yes" for #22, please provide the name of the financial aid programs below.

N/A

23. The percentage of institutional income in the reporting year derived from any non-government financial aid. *

23

24. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable. *
If Not Applicable, indicate "0".

0

25. Provide the percentage of the students who attended this institution during this Reporting Year who received federal student loans to help pay their cost of education at the school. *
If none, indicate "0".

0

26. Provide the average amount of federal student loan debt of graduates who took out federal student loans at this institution. *

$ 0.00

Save Back Next

2020 Institution Data

Institution Data | Fees / Accreditation | Financial | Offerings | Website / Uploads



2020 BPPE Annual Report - Institution - Offerings

☐ Display Instructions for #27 - #37 (Toggle)

27. Total number of students enrolled at this institution in the reporting year. Indicate the number of students attending and/or enrolled in all programs at your institution (minus the number of students in the reporting year who cancelled during the cancellation period) January 1st through December 31st . *
If none, indicate "0".

189

28. Number of Doctorate Degree Programs Offered? Indicate the number of Doctorate degree Programs the institution offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

29. Number of Students enrolled in Doctorate programs at this institution? Indicate the number of students enrolled and/or active in all Doctorate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

30. Number of Master Degree Programs Offered? Indicate the number of Master degree Programs the institution offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

31. Number of Students enrolled in Master programs at this institution? Indicate the number of students enrolled and/or active in all Master programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

32. Number of Bachelor Degree Programs Offered? Indicate the number of Bachelor degree Programs the institution offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

33. Number of Students enrolled in Bachelor programs at this institution? Indicate the number of students enrolled and/or active in all Bachelor programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

34. Number of Associate Degree Programs Offered? Indicate the number of Associate degree Programs offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

0

35. Number of Students enrolled in Associate programs at this institution? Indicate the number of students enrolled and/or active in all Associate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

0

36. Number of Diploma or Certificate Programs Offered? Indicate the number of Diploma or Certificate Programs offered for the reporting year. (Number of Programs not Students) *
If none, indicate "0".

16

37. Number of Students enrolled in diploma or certificate programs at this institution? Indicate the number of students enrolled and/or active in all diploma/certificate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. *
If none, indicate "0".

189

Total Program Count

16

Save Back Next

2020 Satellite Data

BPPE
Bureau for Private Postsecondary Education

Thank You

2020 Annual Report

Satellite Data Submission:

Institution: Employed Security Service Center, Inc. **(35079813)**

Satellite Location:

3355 E SPRING ST., SUITE 209
Long Beach, CA 90806

Your request number is DCA-BPPE-Satellite-001480

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
3. Complete submission of Branch Location Data (if applicable); OR
4. Complete submission of Satellite Location Data (if applicable); OR
5. Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.

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2020 Program Data

BPPE
Bureau for Private Postsecondary Education

Thank You

2020 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: BATON TRAINING CERTIFICATION

Your request number is DCA-BPPE-Program-024703.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
3. Complete submission of Branch Location Data (if applicable); OR
4. Complete submission of Satellite Location Data (if applicable); OR
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2020 Program Data

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2020 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: GUARD CARD ONLY OR ANNUAL REFRESHER

Your request number is DCA-BPPE-Program-024684.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
3. Complete submission of Branch Location Data (if applicable); OR
4. Complete submission of Satellite Location Data (if applicable); OR
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2020 Program Data

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2020 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: FIREARMS CERTIFICATION FOR PRIVATE SECURITY OFFICER (ARMED)

Your request number is DCA-BPPE-Program-024170.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
3. Complete submission of Branch Location Data (if applicable); OR
4. Complete submission of Satellite Location Data (if applicable); OR
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2020 Program Data

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2020 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: FIREARMS REQUALIFICATION FOR PRIVATE SECURITY OFFICER (ARMED)

Your request number is DCA-BPPE-Program-024167.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
3. Complete submission of Branch Location Data (if applicable); OR
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Warning! There is another user actively working on this stage, are you sure you want to continue editing? Only changes made by the first user to submit will be saved. ×

2020 Program Data

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2020 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: PRIVATE SECURITY OFFICER ARMED

Your request number is DCA-BPPE-Program-023955.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
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2020 Program Data

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2020 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: PRIVATE SECURITY OFFICER (ARMED) & SCHOOL SECURITY OFFICER

Your request number is DCA-BPPE-Program-024690.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
3. Complete submission of Branch Location Data (if applicable); OR
4. Complete submission of Satellite Location Data (if applicable); OR
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2020 Program Data

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Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: PRIVATE SECURITY OFFICER UNARMED

Your request number is DCA-BPPE-Program-024686.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
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2020 Program Data

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2020 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: OSHA 10

Your request number is DCA-BPPE-Program-024694.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
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2020 Program Data

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Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: OSHA 30

Your request number is DCA-BPPE-Program-024698.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
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2020 Program Data

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Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: LOGISTICS AND SUPPLY CHAIN PROFESSIONAL

Your request number is DCA-BPPE-Program-024702.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
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2020 Program Data

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2020 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: LOGISTICS AND WAREHOUSE TECHNICIAN

Your request number is DCA-BPPE-Program-024637.

Next Steps:
1. Complete submission of Institution Data; OR
2. Complete submission of ALL approved Program Data; OR
3. Complete submission of Branch Location Data (if applicable); OR
4. Complete submission of Satellite Location Data (if applicable); OR
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