



# Montessori Teacher Academy - 2020 Annual F

## Institution Data:

1. **Report Year:** 2020
2. **Institution Code:** 3100511
3. **Institution Name:** Montessori Teacher Academy
4. **Street Address (Physical Location):** 32920 Pacific Coast Hwy
5. **City:** Dana Point
6. **State:** CA
7. **Zip Code:** 92629
8. **Form of business organization of this institution:** Partnership
9. **Number of Branch Locations:** 0
10. **Number of Satellite Locations:** 0
- 11a. **Is this institution current with all assessments to the Student Tuition Recovery Fund?** Yes
- 11b. **Is this institution current on Annual Fees?:** Yes
12. **Is your institution accredited by an accrediting agency/agencies recognized by the United States Department of Education?** Yes
  - 12a. **Accrediting Agency (more than one agency may be selected):** Montessori Accreditation Council for Teacher Education (MACTE)
13. **If your institution has specialized accreditation from a recognized United States Department of Education accrediting agency, please provide the name of the agency and the accreditation program.** Yes
  - 13a. **Accrediting Agency:** Montessori Accreditation Council for Teacher Education (MACTE)
  - 13b. **Accreditation Program:** Montessori Accreditation Council for Teacher Education (MACTE) Initial Teacher Education Program
14. **Has any accreditation agency taken any final disciplinary action against this institution in the past five years?** No
15. **Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act?** No
16. **Does your institution participate in veterans' financial aid education programs?** No
17. **Does your institution participate in the Cal Grant program?** No
18. **Is your institution on California's Private Postsecondary Institution List (PPSIL)?** Yes

18. Is your institution on California's Eligible Training Provider List (ETPL)? NO
19. Is your institution receiving funds from the Work Innovation and Opportunity Act (WIOA) Pro
20. Does your Institution participate in, or offer, any other state or federal government financial
21. Provide the percentage of institutional income during this Reporting Year that was derived fr
22. Does your Institution participate in, or offer any non-government financial aid programs? (i.e
23. The percentage of institutional income in the reporting year that was derived from any non-g
24. Enter the most recent three-year cohort default rate reported by the U.S. Department of Edu
25. Provide the percentage of the students who attended this institution during this Reporting Y  
the school: 0
27. Total number of students currently enrolled at this institution. Indicate the number of studen  
number of students who cancelled during the cancellation period) January 1st through Decembe
28. Number of Doctorate Degree Programs Offered? Indicate the number of Doctorate degree Pro  
not Students): 0
29. Number of Students enrolled in Doctorate programs at this institution? Indicate the number (i  
institution as of January 1st through December 31st, minus the number of students who cancell
30. Number of Master Degree Programs Offered? Indicate the number of Master degree Programs:  
Students): 0
31. Number of Students enrolled in Master programs at this institution? Indicate the number of s  
January 1st through December 31st, minus the number of students who cancelled during the car
32. Number of Bachelor Degree Programs Offered? Indicate the number of Bachelor degree Progi  
Students): 0
33. Number of Students enrolled in Bachelor programs at this institution? Indicate the number o  
as of January 1st through December 31st, minus the number of students who cancelled during th
34. Number of Associate Degree Programs Offered? Indicate the number of Associate degree Progi
35. Number of Students enrolled in Associate programs at this institution? Indicate the number c  
as of January 1st through December 31st, minus the number of students who cancelled during th
36. Number of Diploma or Certificate Programs Offered? Indicate the number of Diploma or Certi  
Students): 1
37. Number of Students enrolled in diploma or certificate programs at this institution? Indicate t  
programs at your institution as of January 1st through December 31st, minus the number of stud

**Institution's Website:** [www.montessorita.com](http://www.montessorita.com)

## Program Data:

- 1. Report Year:** 2020
- 2. Institution Code:** 3100511
- 3. Institution Name:** Montessori Teacher Academy
- 4. Name of Program:** Early Childhood Montessori Teacher Education Certification Program
- 5. Program Level:** Diploma/Certificate
- 6. Select the Classification of Instructional Programs (CIP) Code that applies to this educational program:**
- 7. Select all Standard Occupational Classification (SOC) Codes that apply to this program:** N/A
- 8. Number of Degrees, Diplomas or Certificates Awarded:** 6
- 9. Total Charges for this Program:** \$5,761.00
- 10. The percentage of enrolled students in the reporting year receiving federal student loans to pay for program costs:**
- 11. The percentage of graduates in the reporting year who took out federal student loans to pay for program costs:**
- 12. Number of Students Who Began the Program:** 9
- 13. Number of Students Available for Graduation:** 6
- 14. Number of On-time Graduates:** 6
- 15. Completion Rate:** 100
- 16. 150% Graduates?:** N/A
- 17. 150% Completion Rate:** N/A
- 18. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the U.S. Department of Education?**
- 19. Graduates Available for Employment:** 6
- 20. Graduates Employed in the Field:** 6
- 21. Placement Rate:** 100
- 22. Graduates employed in the field**
  - 22a. 20 to 29 hours per week:** 0
  - 22b. at least 30 hours per week:** 6
- 23. Indicate the number of graduates employed**

**23a. In a single position in the field of study: 6**

**23b. In concurrent aggregated positions in the field of study (2 or more positions at the same time): 0**

**23c. Freelance/self-employed: 0**

**23d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution: 0**

**24. Does this "Program" lead to a certificate or degree related to one or more of the following all listed below? Yes**

**26. Does this educational program lead to an occupation that requires State licensing? No**

**43. Graduates Available for Employment: 6**

**44. Graduates Employed in the Field: 6**

**45. Graduates Employed in the Field Reported receiving the following Salary or Wage:**

**\$0 - \$5,000: 0**

**\$5,001 - \$10,000: 0**

**\$10,001 - \$15,000: 0**

**\$15,001 - \$20,000: 0**

**\$20,001 - \$25,000: 0**

**\$25,001 - \$30,000: 0**

**\$30,001 - \$35,000: 2**

**\$35,001 - \$40,000: 4**

**\$40,001 - \$45,000: 0**

**\$45,001 - \$50,000: 0**

**\$50,001 - \$55,000: 0**

**\$55,001 - \$60,000: 0**

**\$60,001 - \$65,000: 0**

**\$65,001 - \$70,000: 0**

**\$70,001 - \$75,000: 0**

**\$75,001 - \$80,000: 0**

**\$80,001 - \$85,000: 0**

**\$85,001 - \$90,000: 0**

**\$90,001 - \$95,000: 0**

**\$70,001 - \$75,000: 0**

**\$95,001 - \$100,000: 0**

**Over \$100,000: 0**

## Branch Data:

No Branch Data was inputted by this Institution.

## Satellite Data:

No Satellite Data was inputted by this Institution.

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