| Institutional Characteristics 2016-17 | | | | | | | |
|---|------------------|--|--|--|--|--|--|
| Institution: University of Missouri-Kansas City (178402) | User ID: 29C0011 | | | | | | |
| Overview | | | | | | | |
| Institutional Characteristics Overview | | | | | | | |
| Welcome to the Institutional Characteristics (IC) component. This component collects important information about your institution's mission, student services, and student charges. | | | | | | | |
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Part B - Services and Programs

ams for Servicemembers and Veterans

Part C - Student Services - Special Learning Opportunities

Part C - Student Services: Other Student Services

4. Which of the following selected student services that apply]

are offered by your institution? [Check all

| | Remedial services |
|---------|--|
| | Academic/career counseling services |
| | Employment services for current students |
| | Placement services for program completers |
| | On-campus day care for children of students |
| | None of the above |
| | |
| | of the following academic library resource or service does your institution provide? |
| Check a | ll that apply] |
| | Physical facilities |
| | An organized collection of printed materials |
| | Access to digital/electronic resources |
| | A staff trained to provide and interpret library materials |
| | Established library hours |
| | Access to library collections that are shared with other institutions |
| | None of the above |

Part C - Student Services: Disability Service

10. Please indicate the percentage of all undergr were formally registered as students with disabili services (or the equivalent office).

aduate students enrolled during fall 2015 who ties with the instituti on's office of disability

User ID: 29C0011

| (| | |
|-------|----------------------|---|
| | 3 percent or less | |
| | More than 3 percent: | % |

You may use the space below to provide context for the data you've reported above. These context ad abould be written to be ated on the College Neuroster website adarata ad by atudaat

| notes will be posted on the College Navigator we | edsite, and should be written to be underst | bod by students |
|--|---|-----------------|
| | | |
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| | 1 | | |
|--|---|--|--|

Part D - Undergraduate Student Charges

If the institution charges an appli <u>cation fee, in</u>dicate the amount.

| | 🕜 Amor | | Prior year |
|-------------------------------|------------|----|------------|
| Indergraduate application fee | | 35 | |
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User ID: 29C0011

Institution: University of Missouri-Kansas City (178402)

Part D - Graduate Student Charges

If the institution charges an appli <u>cation fee, in</u>dicate the amount.

| in the montation charges an ap | | | | | | |
|---------------------------------|-----------------|----------------------------------|------------------------|---------------------|--------------|------------|
| | | | | Amount | Prior | year |
| Graduate application fee | | | | 3 | 5 | 35 |
| | | | | | | |
| Please do not ir | | or Doctor's Deo se programs a | | | programs. | |
| 7. Charges to full-time gradua | te students | for the fu | ull aca <u>demic y</u> | <u>ear 2016-</u> 17 | | |
| | | | | | | |
| | In-district | Prior year | I <u>n-state</u> | Prior year | Out-of-state | Prior year |
| Average tuition | 6,462 | 6,213 | 6,462 | 6,213 | 16,685 | 16,043 |
| Required fees | 1,009 | 1,002 | 1,009 | 1,002 | 1,009 | 1,002 |
| | | | | | | |
| 8. Per credit hour charge for p | art-time gradua | ate students | | | | |
| | | | | | | |
| | In-district | Prior year | I <u>n-state</u> | Prior year | Out-of-state | Prior year |
| Per credit hour charge | 359 | 345 | 359 | 345 | 927 | 891 |

| Part D - Student Charges - Graduate, Do | | s - Graduate, Do ctor's Professional Practice Tuition | | | |
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| Room and board and other expenses | | | |
|---|-------|--|---|
| Off-campus (with fami | ily): | | |
| Other expenses | | | |
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Part E - Athletic Association

Prepared by

| This survey co | mponent was prepared by: | | | | | | | |
|----------------------------|--|--------------|-----------------------------------|-----------|-------------------|--|--|--|
| A | Keyholder | 0 | SFA Contact | 0 | HR Contact | | | |
| 0 | Finance Contact | 0 | Academic Library Contact | | Other | | | |
| Name: | e: Randy Sade | | | | | | | |
| Email: | SadeR@umsystem.edu | | | | | | | |
| | | | | | | | | |
| How long did it component? | take to prepare this survey | 17 | hours | 30 | minutes | | | |
| | | | | | | | | |
| | he preparer is being collected so tha tions concerning the data. The Keyl | | | | | | | |
| eporting burde | k to prepare this component is being an associated with IPEDS. Please in rch data sources, complete and revi | nclude in yo | our estimate the time it took for | you to re | eview instructior | | | |
| Thank you for | your assistance. | | | | | | | |

Summary

Institutional Characteristics Component Summary Academic Year Reporters