

User ID: 29C0011

#### Institution: University of Missouri-St Louis (178420)

# Part A - Mission Statement

1. Provide the institution's mission statementor a web address (URL) where the missionstatement can be found. Typed statements are limited to 2,000 characters or less. The missionstatement will be available to the public on College Navigator.

Mission Statement	https://	www.umsl.edu/~ir/fact%20book/mission_statement.html
URL:		
Mission Statement:		

### Part B - Services and Programs for Servicemembers and Veterans

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

# Part C - Student Services - Special Learning Opportunities

1. Does	your institution accept any of	the following? [Check all that apply]
	Dual credit (college credit earne	ed while in high school)
	Credit for life experiences	
	Advanced placement (AP) crec	lits
	None of the above	

# 2. What types of special learning opportunities are

offered by your institution? [Check all that

apply]

	Army	Navy	Air Force					
<u>St</u>	udy abroad							
Weekend/evening college								
Te	acher certification (for the	elementary, middle school/junior h	igh, or secondary level)					
Do	not include certifications	to teach at the postsecondary leve	91.					
Students can complete their preparation in certain areas of specialization         Students must complete their preparation at another institution for certain areas of specialization								
		proved by the state for the initial ce						

o. Il your moditation granto a baonoior	o dogroo or
of study at the undergraduate level, how m	iany g

gh sc8(k)3(en)5.8(d/).7 -18.72 I372 I3a7 -.78 0 I h 0at appqui? [C(ce)ent2 Tce?015 Tc .003

Part C - Student Services: Other Student Services

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

are offered by your institution? [Check all

inai appi	, , , , , , , , , , , , , , , , , , ,
	Remedial services
	Academic/career counseling services

User ID: 29C0011

### Institution: University of Missouri-St Louis (178420)

# Part C - Student Services - Distance Education

 7. Please indicate at what level(s) your inst
 itution does or does not offer distance education

 courses and/or distance education programs. Check all that apply.

	Distance education courses	Distance education programs	Does not offer Distance Education
Undergraduate level			
Graduate level			
8. Are all the program programs?	ns at your institut ion	offered exclusively via distanc <u>e</u>	education
	No		
	Yes		

# Part C - Student Services: Disability Services

9. Please indicate the percentage of all undergraduate students enrolled during Fall 2018 who were formally registered as students with disabilities with the institut ion's office of disability services (or the equivalent office).

	3 percent or less		
	More than 3 percent:	6	%

User ID: 29C0011

### Institution: University of Missouri-St Louis (178420)

# Part D - Undergraduate Student Charges

If the institution charges and	appli <u>ca</u>	a <u>tion fee, in</u> dica	ite the amount			
				🕜 Amour	nt Pri	or year
Undergraduate applicat	ion fee				35	35
E Charges to full time unde	raraduata atuda	ant of	for the full coo	domio voor 201	0.00	
5. Charges to full-time unde				demic year 201		
Please be sure to report an	average tuition	that includes a	Il students at a	all levels (freshr	man, sophomore,	etc.).
	In-district	Prior year	In-state	Prior year	Out-of-state	Prior year
All full-time undergraduate s	tudents					
Average tuition	11,079	10,491	11,079	10,491	29,295	27,900
Required fees	0	0	0	0	0	0
6. Per credit hour charge for	· part-ti <u>me unde</u>	ergraduate stud	ents			
Please be sure to report an etc.).	average per cre	edit tuition that	includes all stu	udents at all lev	els (freshman, so	phomore,
	In-district	Prior year	I <u>n-state</u>	Prior year	Out-of-state	Prior year
Per credit hour charge	369	350	369	350	977	930

# Part D - Graduate Student Charges

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

	Amount	Prior year
Graduate application fee	50	50

#### Please do not include tuition for Doctor's Degree – Professional Practice programs. Data for those programs are collected separately.

7. Charges to full-time graduate students for the full academic year 2019-20

	In-district	Prior year	I <u>n-state</u>	Prior year	Out-of-state	Prior year
Average tuition						
			1		1	

Institution: University of Missouri-St Louis (178420) User ID: 29C0011								
Part D - Student Charges - Graduate, Doctor's-Professional Practice Tuition								
9. List the typical tuition and required fees fo r a full-time doctor's-professional practice student in any of the selected programs for the full academic year 2019-20.								
in any of the selected programs for the full academic <u>year 2013-20.</u>								
DO NOT include room and board charges								
Doctor's degre	ee-professional practice	In-state	Out-of-state					
1. Chiropraction	1. Chiropractic (D.C. or D.C.M.):							
I	uition amount							
<u>R</u>	tequired fees							
2. Dentistry (D	D.D.S. or D.M.D.):							
I	uition amount							
R	Required fees							
3. Medicine (M.D.):								
Ī	uition amount							
R	Required fees							
4. Optometry	(O.D.):							
Ţ	uition amount	24,400	40,787					
R	Required fees	0	0					
5. Osteopathie	c Medicine (D.O.):							
I	uition amount							
<u>R</u>	Required fees RequC.M.):data) 0 -12.72	2 -128 -157 0 <mark>-128 5 I</mark> W n 1	g 2029999 57 0 1S 5					
6. Pharmacy (	(Pharm.D.):							
I	uition amount							
<u>R</u>	Required fees							
7. Podiatry (P	od.D., D.P., or D.P.M.):							
I	uition amount							
R	Required fees							
8. Veterinary Medicine (D.V.M.):								
I	uition amount							
R	Required fees							
9. Law (J.D.):								
I	uition amount							
1		1						

Part D - Student Charges - Room and Board

10. What are the typical room<u>and b</u>oard charges for a student for the full academic year 2019-

20?

If your institution offers room or board at no charge to students, enter zero.

If you report room and board separately, leave the combined charge blank. If you report a combined charge, leave the room and board charges blank.

Room and board charges	Amount	Prior year	
Room charge (Double occupancy)	5,450	5,340	
🐔 Board charge (Maximum plan)	4,100	4,023	
Combined room and board charge			

Print Forms (data)

Off-campus (with family):								
Other expenses	5,244	5,692	5,612	6,318				
You may use the space below to provide context for the data you've reported above. These context notes will be posted on the College Navigator website, and should be written to be understood by students and parents.								

#### Prepared by

The name of the preparer is being collected so that we can follow up with the appropriate person in the event that there are questions concerning the data. The Keyholder will be copied on all email correspondence to other preparers.

The time it took to prepare this component is being collected so that we can continue to improve our estimate of the reporting burden associated with IPEDS. Please include in your estimate the time it took for you to review instructions, query and search data sources, complete and review the component, and submit the data through the Data Collection System.

Thank you for yo	our assistance.									
This survey co	mponent was prepared	by:								
	Keyholder	SFA Contact			HR Contact					
	Finance Contact		Academic I Contact	Library		Other				
Name:	Randy Sade	Randy Sade								
Email:	SadeR@umsystem.ed	lu								
							I			
How many staff from your institution only were involved in the data collection and reporting process of this survey component?										
11.00	11.00 Number of Staff (including yourself)									
How many hours did you and others from your institution only spend on each of the steps below when responding to this survey component? Exclude the hours spent collecting data for state and other reporting purposes.										
Staff member	Collecting Data Needed	Revising Data to Match IPEDS Requirements		Entering Data		Revising and Locking Data				
Your office										
How many hou responding to t <i>Exclude the hou</i> Staff member	Number of Staff (includi rs did you and others fr this survey component trs spent collecting data for Collecting Data	rom your institut ? or state and other Revising Dat Match	reporting j	purposes.		Revising and I				

### Summary

### Institutional Characteristics Component Summary Academic Year Reporters

IPEDS collects important information regarding your institution. All data reported in IPEDS survey components become available in the IPEDS Data Center and appear as aggregated data in various Department of Education reports. Additionally, some of the reported data appears specifically for your institution through the College Navigator website and is included in your institution's Data Feedback Report (DFR). The purpose of this summary is to provide you an opportunity to view some of the data that, when accepted through the IPEDS quality control process, will appear on the College Navigator website and/or your DFR. College Navigator is

#### Print Forms (data)

	In-district	\$12,007	\$0
	In-state	\$12,007	\$0
	Out-of-state	\$29,477	\$0
Alternative tuition plans		Tuition payment plan	

Edit Report

Institutional Characteristics