



2008 ANNUAL REPORT
Use fall 2007 data in completing this form

Return an Adobe Acrobat electronic version and a paper version with original CEO signature by May 23, 2008.

Name of Institution Lane Community College
Mailing Address 4000 East 30th Avenue
City, State, Zip Eugene, OR 97405 Main Phone Number 541/463-3000

1. Chief Executive Officer: President
Title (Dr., Rev., Mr., Ms., etc.): Dr. Phone 541/463-5301
Name Mary Spilde FAX 541/463-4201
Position President E-mail spildem@lanecc.edu

2. Accreditation Liaison Officer (ALO): Vice President for Instruction and Student Services
Title (Dr., Rev., Mr., Ms., etc.): Dr. Phone 541/463-5120
Name Sonya Christian FAX 541/463-4170
Position Vice President for Instruction and Student Services E-mail christians@lanecc.edu

3. Institution Type (check one): ☒ Public ☐ Tribal/Native ☐ Private Non-Profit ☐ Private For-Profit

4. Degree Levels Offered (check all that apply): ☒ Associate ☐ Baccalaureate ☐ Masters ☐ Doctorate

5. Have changes been made in the Articles of Incorporation and/or By-Laws since the 2007 Annual Report was filed? If yes, please attach a copy of the revised document(s) to this Annual Report Form. ☐ Yes ☒ No

6. Calendar plan (semester, quarter, 4-1-4, trimester, other) Quarter

7. <u>Students (All locations)</u>	<u>Unduplicated Headcount</u>	<u>Full-Time Equivalent (FTE)</u>
(a) undergraduate	<u>11,594</u>	<u>2,816</u>
(b) graduate (if applicable)	<u>n/a</u>	<u>n/a</u>
(c) unclassified	<u>6,721</u>	<u>759</u>
Totals	<u>18,315</u>	<u>3,575</u>

8. <u>Faculty (All locations)</u>	<u>Unduplicated Headcount</u>	<u>Full-Time Equivalent (FTE)</u>
(a) Full-Time	<u>244</u>	<u>229.18</u>
(b) Part-Time	<u>271</u>	<u>140.16</u>
Totals	<u>515</u>	<u>369.78</u>

9. Institutional Finances

Private/Independent institutions (Include total Educational and General [E&G] expenses) (a) \$ Not Applicable

Public institutions (Include total current funds, expenditures and transfers, but exclude separate medical school and/or hospital budgets.) (b) \$ 104,083,518

NOTE: ENCLOSE A COPY OF THE APPROPRIATE **IPEDS FINANCIAL REPORT** PAGE SHOWING VALUE REPORTED FOR (a) OR (b) above.

All Institutions Respond. In NONE, so indicate.

Operating Deficit \$ None
Accumulated Deficit \$ None

10. Cohort default rate on Federal Guaranteed Student Loans for the most recent year for which data are available:

Year 2005 Default Rate 9.6% %

11. Does your institution use its accreditation or pre-accreditation with the Northwest Commission on Colleges and Universities to establish eligibility to participate in Higher Education Act (HEA) programs, including Title IV funding? ☒ Yes ☐ No

IN RESPONDING TO ITEMS 12-17, USE SUPPLEMENTARY PAGES AS NECESSARY.

12. New degree/certificate programs offered since your 2007 Annual Report was filed. If **NONE**, so indicate.

<u>Certificate/Degree Level</u>	<u>Curriculum or Program</u>
Please see attached list	

13. Degree/Certificate programs of 30 semester/45 quarter credits or more in length terminated in 2007-2008. If **NONE**, so indicate.

<u>Certificate/Degree Level</u>	<u>Curriculum or Program</u>
None	

14. Contractual relationships with non-accredited organizations. (See Commission Policy A-6) If **NONE**, so indicate.
List academic credit program(s)/course(s) operated jointly in contractual relationships with external organizations. Exclude student teaching partnerships, research contracts, contracts for non-credit offerings, etc.

<u>Degree/Certificate</u>	<u>Program(s)/Course(s)</u>	<u>External Agency/Organization</u>	<u>Student Headcount</u>
None			

15. Substantive Changes including degree or certificate programs planned for 2008-2009. (See Commission Policy A-2) If **NONE**, so indicate.

<u>Certificate/Degree Level</u>	<u>Curriculum or Program</u>
None	

- 16 Domestic Certificates/Degree Programs where 50% or more of the credits are offered at Off-Campus Locations or through Distance Education. If **NONE**, so indicate. Accurate information about off-campus programs is critical to the Commission in responding to inquiries and verifying program locations to the U.S. Department of Education relative to Title IV eligibility.

Location	Degree/ Certificate Name/Level	Program	Student Enrollment (Unduplicated Headcount)	On-Site Administrator YES or NO	Co-Sponsoring Organization (If Applicable)
a) Certificate/Degree Programs offered in the United States at any off-campus location including branch, satellite or secondary sites in or out of the institution's service area.					
None					
b) Degree and certificate Programs of 30 semester or 45 quarter credits or more offered by Distance Education					
Distance Learning Media	Associate of Arts Oregon Transfer	General education and elective courses via online, telecourse, live-interactive, teleweb, and Oregon's "O.N.E." host/provider courses	1406	Yes	
Distance Learning Media	Associate of Applied Science	AAS and applied certificate courses in accounting and administrative assistant technologies, computer information systems, human services, dental hygiene, drafting, medical office assisting, and health records.	586	Yes	

Please complete this form noting all educational activities your institution offers abroad, separately or in cooperation with other institutions, U.S. as well as foreign. **If there are no foreign country branch operations or study-abroad programs for which your institution awards academic credit, so indicate.**

[illegible]

COMMENTS:

CEO Signature

Maxy FT Spdx

CEO Printed Name

Mary Spilde

Title

President

Date _____

5-14-08

Certificate/Degree Level

Associate of Applied Science
Associate of Applied Science
Associate of Applied Science
Certificate of Completion
Certificate of Completion
Certificate of Completion
Certificate of Completion
Certificate of Completion
Certificate of Completion
Certificate of Completion
Certificate of Completion
Certificate of Completion

Curriculum or Program

Physical Therapist Assistant
Water conservation Technician
Electrician Apprenticeship Technologies
Electrician Apprenticeship Technologies
Limited Energy Apprenticeship Technologies
Professional Truck Driver
Accounting Clerk
Baking and Pastry
Food Preparation and Production
Restaurant Ownership
Medical Transcriptionist
Coding Associate
Web Programming

Institution: Lane Community College (209038)

User ID: P72090381

Part C - Expenses and Other Deductions

Fiscal Year 2007

Report in whole dollars only						
		1	2	3	4	5
Line No.	Description	Current year total	Salaries & wages	Employee fringe benefits	Depreciation	All other
	Nonoperating Expenses and Deductions					
16	Interest	3,786,858				3,786,858
17	Other nonoperating expenses & deductions (CV) CV=(C18-C16)	0	0	0	0	0
18	Total nonoperating expenses & deductions (CV) CV=(C19-C15)	3,786,858	0	0	0	3,786,858
19	Total expenses & deductions	104,083,518	46,089,827	21,591,085	2,577,474	33,825,132
	Prior year amount	108,550,507	46,678,779	23,743,639	2,688,425	35,439,664

CV = Calculated Value

CAVEATS

Institution: Lane Community College (209038)

User ID: P72090381

Part C - Expenses and Other Deductions

Fiscal Year 2007

Report in whole
dollars
only

Line No.	Description	1 Current year total	2 Salaries & wages	3 Employee fringe benefits	4 Depreciation	5 All other
	Nonoperating Expenses and Deductions					
16	Interest	3,786,858				3,786,858
17	Other nonoperating expenses & deductions (CV) CV=(C18-C16)	0	0	0	0	0
18	Total nonoperating expenses & deductions (CV) CV=(C19-C15)	3,786,858	0	0	0	3,786,858
19	Total expenses & deductions	104,083,518	46,089,827	21,591,085	2,577,474	33,825,132
	Prior year amount	108,550,507	46,678,779	23,743,639	2,688,425	35,439,664

CV = Calculated Value

CAVEATS