Deadline for submitting this Profile: November 17, 2000

INSTITUTIONAL PROFILE
FOR GENERAL INFORMATION
AND ENROLLMENT DATA
FALL 2000

General Instructions

The Commission on Colleges has divided its institutional profile into two documents:

- Institutional Profile for General Information and Enrollment Data (Fall 2000)
  (To be distributed January 2001 for return March 2001)

Before completing the Fall 2000 Profile, please

☐ Carefully read all directions

☐ Make a copy of this form

☐ Assign completion of the form to an individual knowledgeable in the area of enrollment data

Before returning the completed Fall 2000 Profile, please review the last page of this document to ensure that checklists are complete. Return one complete set of current catalogs (undergraduate and graduate) with your Profiles (original and copy). Thank you for your prompt attention.

Please direct all questions to Steve Whittington at (404) 679-4501, ext. 532
SECTION ONE: General Information

Part I: Instructions

Listed is the response provided by your institution on the 1999 Profile. If the information submitted last year is incorrect or incomplete, please submit changes on a letter signed by the chief executive officer of the institution and return with the completed Profile.

1. Institution's Official Name

The University of West Florida

2. Institution's Mailing Address

11000 University Parkway
Pensacola, FL 32514-5750

3. Main Switchboard Telephone Number

(850) 474-2000

4. Institution's home Web Site Address (Do not include http://www)

uwf.edu

5. Institutional Governance or Control

Public

6. Institutional Religious Affiliation

7. Calendar System

Semester

8. Name of Governance System
(Includes governing board system, not coordinating board)

State University System of Florida
Part II: Instructions

Listed in the left-hand column below (items 9-24) is the response provided by your institution on the 1999 Profile. If the information submitted last year is incorrect or incomplete, please make the correction or provide additional information in the right-hand column. If the information provided last year is complete and correct, please do not repeat the information.

A. Chief Executive Officer

9. Name
   Dr. Morris L. Marx

10. Title
    President

11. Office Mailing Address
    11000 University Parkway
    Pensacola, FL 32514-5750

12. Telephone Number
    (850) 474-2227

13. Fax Number
    (850) 474-3131

14. E-Mail Address
    mm Marx@uwf.edu

B. Chair of the Board

15. Name
    Thomas F. Pettway

16. Mailing Address
    P.O. Box 10197
    Jacksonville, FL 32207

17. Fax Number
    (904) 346-3000

18. Term of office as Chair
    (Indicate ending date of term)
    5/99-9/05
C. Institution’s Accreditation Liaison Officer

The Commission encourages each institution to appoint a member of its staff as the Accreditation Liaison Officer to serve as a contact person with the Commission, supervise the completion of this form, serve as a resource person for self-studies and for information on accreditation criteria, policies, and procedures, and coordinate visits. (For more information regarding the liaison, see enclosure.)

19. Name
   Carl A. Backman

20. Title
   Associate Vice President for University Planning

21. Office Mailing Address
   11000 Univ. Pkwy.
   Pensacola, Fl 32514

22. Telephone Number
   (850) 474-2212

23. Fax Number
   (850) 474-3253

24. E-Mail Address
   cbackman@uwf.edu

D. Respondent

Please provide the following information for the individual responsible for completing this form. If the respondent is the institution’s Accreditation Liaison Officer, please indicate this by entering “Accreditation Liaison Officer” on line 25, and leave items 26 through 30 blank.

25. Name
   Jacqueline T. Berger

26. Title
   Director, Institutional Research

27. Office Mailing Address
   11000 University Parkway
   Pensacola, FL 32514

28. Telephone Number
   (850) 474-2118

29. Fax Number
   (850) 474-3253

30. E-Mail Address
   jberger@uwf.edu
SECTION TWO: Enrollment Information

Instructions:

In items 1-7 below, the left-hand column states your institutional response from 1999. Please report your institution's enrollment for the 2000 fall term in the right-hand column. *Fill in all applicable blanks in the right-hand column, even if the 2000 figure is the same as the 1999 figure.* When tabulating the total, include all degree and non-degree students, *wherever instruction occurs.* For purposes of Commission's use, please use the following Commission definitions for your computation and **NOT YOUR INSTITUTION'S DEFINITION.**

A full-time undergraduate student is one who is enrolled for 12 or more credit hours.

A full-time post-baccalaureate/graduate student is one who is enrolled for 9 or more credit hours.

<table>
<thead>
<tr>
<th>For-Credit, Full-Time Undergraduate and Post-Baccalaureate Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Total number of full-time undergraduate students (those taking 12 or more credit hours): 4149</td>
</tr>
<tr>
<td>2. Total number of full-time post-baccalaureate (Master's or doctoral programs, or other for-credit programs) students (those taking 9 or more credit hours): 369</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>For-Credit, Part-Time Undergraduate and Post-Baccalaureate Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. a. Total hours of all undergraduate students carrying fewer than 12 credit hours (definition of part-time student): 1378</td>
</tr>
<tr>
<td>b. Divide the total hours in 3a by 12, rounding to the nearest whole number: 1158</td>
</tr>
<tr>
<td>4. a. Total hours of all post-baccalaureate students (Master's or doctoral programs, or other for-credit programs) carrying fewer than 9 credit hours (definition of part-time student): 3703</td>
</tr>
<tr>
<td>b. Divide total hours in 4a by 9, rounding to the nearest whole number: 633</td>
</tr>
<tr>
<td>5. Total</td>
</tr>
<tr>
<td>Total of lines 1, 2, 3b, and 4b: 6718</td>
</tr>
</tbody>
</table>
Non-Credit

6. a. For each non-credit course offered in the 2000 fall term, multiply the total number of contact hours for the course (as determined by your institution) by the total number of students enrolled in the course. Add resulting figures for all non-credit courses (see example below).

b. Divide combined total in 6a by 168 if your institution is on a semester or trimester system (12 hours/week x 14 weeks), or by 120 if your institution is on a quarter system (12 hours/week x 10 weeks). Round the quotient to the nearest whole number.

Total

7. Total of items 5 and 6b:

Example:

An institution has five non-credit courses. Course one has 17 students and 20 course contact hours; course two has 11 students and 15 contact hours; course three has 10 students and 15 contact hours; course four has 16 students and 5 contact hours; and course five has 14 students and 10 contact hours.

<table>
<thead>
<tr>
<th>Calculation for Part 6a.</th>
<th>Students</th>
<th>Contact Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course one:</td>
<td>17</td>
<td>20</td>
</tr>
<tr>
<td>Course two:</td>
<td>11</td>
<td>15</td>
</tr>
<tr>
<td>Course three:</td>
<td>10</td>
<td>15</td>
</tr>
<tr>
<td>Course four:</td>
<td>16</td>
<td>5</td>
</tr>
<tr>
<td>Course five:</td>
<td>14</td>
<td>10</td>
</tr>
</tbody>
</table>

Calculation Total for Part 6a. = 875
SIGNATURES OF VERIFICATION:

We certify that the information provided in this Profile is correct.

[Signature of Chief Executive Officer]  [Date: 11-16-2000]

[Signature of Respondent]  [Date: 11-16-2000]

COMPLETION CHECKLIST:

☑ Are all sections of this Profile complete?

☑ Have the respondent and Chief Executive Officer provided signatures for verification?

RETURN CHECKLIST:

☑ Two (2) completed copies of this Profile (original and one copy).

☑ One (1) complete set of current catalogs (undergraduate and graduate).

☐ Letter for Section One, Part 1 (only if there changes to lines 1 through 7)

Return this completed Profile and all required materials to:

Commission on Colleges
ATTN: Institutional Profiles
Southern Association of Colleges and Schools
1866 Southern Lane
Decatur, Georgia 30033-4097