



# Project Heartbeat, LLC - 2017 Annual Report Summary

## Institution Data:

1. **Report Year** : 2017
2. **Institution Code** : 86218721
3. **Institution Name** : Project Heartbeat, LLC
4. **Street Address (Physical Location)** : 333 Hegenberger Rd, Suite 855
5. **City** : Oakland
6. **State** : CA
7. **Zip Code** : 94621
8. **Check all that apply to this institution** : For profit institution; Corporation
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?** : No
- 12a. **Accrediting Agency (more than one agency may be selected)** : N/A
13. **If your institution has specialized accreditation from a recognized United States Department of Education approved specialized/programmatic accreditor, list the accreditation below.** : N/A
14. **Has any accreditation agency taken any final disciplinary action against this institution?** : No
15. **Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act?** : No
- 15a. **What is the total amount of Title IV funds received by your institution in this Reporting Year?** :  
N/A

**16. Does your institution participate in veterans' financial aid education programs? :** No

**16a. What is the total amount of veterans' financial aid funds received by your institution in this Reporting Year? :** N/A

**17. Does your institution participate in the Cal Grant program? :** No

**17a. What is the total amount of Cal Grant Funds received by your institution in this Reporting Year? :**  
N/A

**18. Is your institution on California`s Eligible Training Provider List (ETPL)? :** Yes

**19. Is your institution receiving funds from the Work Innovation and Opportunity Act (WIOA) Program? :** Yes

**19a. What is the total amount of WIOA funds received by your institution in this Reporting Year? :** 0

**20. Does your Institution participate in, or offer any other government or non-government financial aid programs? (i.e., WIC, vocational rehab, private grants/loans, institutional grants/loans) :** No

**20a. You indicated "Yes" for #20, please provide the name of the financial aid program below. :** N/A

**21. Provide the percentage of institutional income during this Reporting Year that was derived from public funding. :** 0

**22. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable. :** 0

**23. Provide the percentage of the students who attended this institution during this Reporting Year who received federal student loans to help pay their cost of education at the school. :** 0

**24. Total number of students enrolled at this institution :** 0

**25. Number of Doctorate Degree Programs Offered? :** 0

**26. Number of Students enrolled in Doctorate programs at this Institution? :** 0

**27. Number of Master Degree programs offered? :** 0

**28. Number of Students enrolled in Master programs at this institution? :** 0

**29. Number of Bachelor Degree programs offered? :** 0

**30. Number of Students enrolled in Bachelor programs at this institution? :** 0

**31. Number of Associate Degrees programs offered? :** 0

**32. Number of Students enrolled in Associate programs at this institution? :** 0

**33. Number of Diploma or Certificate Programs offered? :** 0

**34. Number of Students enrolled in Diploma or Certificate programs at this institution? :** 0

**Total Program Count :** 0

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

**Files Uploaded :** Performance Fact Sheet; Catalog

## Program Data:

**1. Report Year :** 2017

**2. Institution Code :** 86218721

**3. Institution Name :** Project Heartbeat, LLC

**4. Name of Program :** Emergency Medical Technician

**5. Degree/Program Level :** Diploma/Certificate

**6. Degree/Program Title :** Diploma/Certificate

**7. Number of Degrees or Diplomas Awarded :** 0

**8. Total Charges for this Program :** 0.00

**9. The percentage of enrolled students in 2017 receiving federal student loans to pay for this program :** 0

**10. The percentage of graduates in 2017 who took out federal student loans to pay for this program :** 0

**11. Number of Students Who Began the Program :** 0

**12. Number of Students Available for Graduation :** 0

**13. Number of On-time Graduates :** 0

**14. Completion Rate :** 0

**15. 150% Completion Rate :** 0

**16. Is the above data taken from the Integrated Postsecondary Education Data System (IPEDS) of the United States Department of Education? :** No

**17. Graduates Available for Employment :** 0

**18. Graduates Employed in the Field :** 0

**19. Placement Rate :** 0

**Graduates employed in the field :**

**20a. 20 to 29 hours per week :** 0

**20b. at least 30 hours per week :** 0

**Indicate the number of graduates employed :**

**21a. In a single position in the field of study :** 0

**21b. In concurrent aggregated positions in the field of study (2 or more positions at the same time) :**

0

**21c. Freelance/self-employed :** 0

**21d. By the institution or an employer owned by the institution, or an employer who shares ownership with the institution :** 0

**22. Does this educational program lead to an occupation that requires State licensing? :** Yes

**22a. Do graduates have the option or requirement for more than one type of licensing State exam? :**

No

**Name of Option/Requirement (1) :** N/A

**Name of Option/Requirement (2) :** N/A

**Name of Option/Requirement (3) :** N/A

**Name of Option/Requirement (4) :** N/A

**23. Name of the State licensing entity that licenses this field :** Emergency Medical Services Authority

**24. Name of State Exam :** National Registry EMT

**25. Number of Graduates Taking State Exam :** 0

**26. Number Who Passed the State Exam :** 0

**27. Number Who Failed the State Exam :** 0

**28. Passage Rate :** 0

**29. Is this data from the State licensing agency that administered the exam? :** 0

**29a. Name of Agency :** National Registry EMT (NREMT)

**30. If the response to #29 was "No" provide a description of the process used for Attempting to Contact Students :** N/A

**31. Name of the State licensing entity that licenses this field :** Emergency Medical Services Authority (EMSA)

**32. Name of State Exam :** National Registry EMT (NREMT)

**33. Number of Graduates Taking State Exam :** 0

**34. Number Who Passed the State Exam :** 0

**35. Number Who Failed the State Exam :** 0

**36. Passage Rate :** 0

**37. Is this data from the State licensing agency that administered the State exam? :** 0

**37a. Name of Agency :** National Registry EMT (NREMT)

**38. If the response to #37 was "No" provide a description of the process used for Attempting to****Contact Students :** N/A**39. Graduates Available for Employment :** 0**40. Graduates Employed in the Field :** 0**41. Graduates Employed in the Field Reported receiving the following Salary or Wage: For graduates employed in the field, indicate their salaries/earnings below. If there are none in any specific range, indicate "0." :****\$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 :** 0**\$35,001 - \$40,000 :** 0**\$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**\$95,001 - \$100,000 :** 0**Over \$100,000 :** 0

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**Branch Data:**

No Branch Data was inputted by this Institution.

## Satellite Data:

No Satellite Data was inputted by this Institution.

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