

# **Annual Report Submission Confirmation**

# Employed Security Service Center, Inc.

This is to confirm your Annual Report submission. If you have any questions, please reference the request number provided below communicating with the Bureau.

Request #: DCA-BPPE-Finalize-010366

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

If you have any questions please contact the BPPE Annual Report Unit by email at bppe.annualreport@dca.ca.gov or by phone at (916) 574-8900, press "7" when prompted.

#### Request:

POST: https://bppews.dca.ca.gov/v1/batchsubmit-customer

Authorization: Bearer

eyJhbGciOiJIUzI1NiIsInR5cCl6lkpXVCJ9.eyJkZXNjcmlwdGlvbil6lmF1dG8tZ2VuZXJhdGVkliwiaWF0ljoxNTQ1MzI0OTU2LCJleHAiOjI0OTE0MDQ5NTYsImlzcyl6lkNBLURDQS1CUFBFIiwic3ViljoiYXV0by1nZW5lcmF0ZWQifQ.9sU4zQgTVr34

W1jiPsgP0Wim-7ZFeDOnave5493a\_Bg

Content-Type: application/json

{"institutionCode": "35079813", "year": 2022}

# Response:

200 OK

X-Powered-By:Express ETag:W/"2-nOO9QiTlwXgNtWtBJezz8kv3SLc"

Date:Mon, 20 Nov 2023 16:45:47 GMT

OK	

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# 2022 Annual Report

Institution Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Your request number is DCA-BPPE-006187.

#### Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - 5. Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report Institution Data Workflow

(Printer Friendly Annual Report Instructions Document)

2022 BPPE Annual Report - Institution - General Info

Annual Report data is institutional data that is combined for the main location, branch and all satellite locations.

2. Institution Code \*

Enter valid Institution Code (main location). Only entry of valid Institution Code will auto-populate the read-only Institution Name field in question #3.

35079813

1. Report Year \*

2022

3. Institution Name (auto-populated) \*
If a valid Institution Code is entered in question #2, the Institution Name will auto-populate. If incorrect Institution Code is entered, you must clear out the Code field in question #2, then enter the correct Institution Code to re-fill the Institution Name with the correct Institution Name.

Employed Security Service Center, Inc.

Street Address (Physical Location) \*

3530 Atlantic Ave, Suite 200

5. City \*

Long Beach

6. State \*

CA

7. Zip Code \*

90807

9. Number of Branch Locations \* Indicate the number of branch locations associated with the main location. If none, enter zero ("0")

0

10. Number of Satellite Locations \*

Indicate the number of branch locations associated with the main location or branch location. If none, enter zero ("0")

0

# Fees / Accreditation

# 2022 BPPE Annual Report - Institution - Fees/Accreditation

Display Instructions for #11 - #14 (Toggle)

#### **Not Checked**

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

- 13. If your institution has specialized accreditation from a recognized United States Department of Education approved specialized/programmatic accreditor, list the accreditation below.
- 14. Has any accreditation agency taken any final disciplinary action against this institution in the reporting year? Indicate "yes" if the institution has had final disciplinary action taken against it by an accreditation agency; Indicate "no" if no final action has been taken against the institution by an accreditation agency. If Yes, please upload a copy of the action at #14a. \*

#### No

# **Financial**

# 2022 BPPE Annual Report - Institution - Financial

For the questions below, please disclose any funds received by the institution from the federal and/or state government to provide services to the general public.

Display Instructions for #15 - #26 (Toggle)
Checked

# Instructions

(Printer Friendly Annual Report Instructions Document)

- 21. Provide the percentage of institutional income in the Report Year derived from public funding. (Add #15, #16, #17, and #19. Divide the sum by Institution's Total Revenue) All money that is generated by the government to provide services to the general public is "public funding."
- 23. Provide the percentage of institutional income during this reporting year derived from any non-government financial aid. All non-government financial aid divided by total revenue.
- 24. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable. The Cohort Default Rate (CDR) represents the percentage of this institution's students that failed to make required payments on their federal loans within three years of when they were required to begin repayment of that loan.
- 15. Does your institution participate in federal financial aid programs under Title IV of the Federal Higher Education Act? (This includes federal loans and grants)

#### No

16. Does your institution participate in veterans' financial aid education programs? \*

No

17. Does your institution participate in the Cal Grant program? \*

No

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? \*

\$222,327.00

20. Does your Institution participate in, or offer, any other state or federal government financial aid programs? (i.e., vocational rehab...) \*

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

Yes

Vocational Rehabilitation, Los Angeles County Office of Education

21. Provide the percentage of institutional income during this Reporting Year derived from public funding. \*
If none, indicate "0".

24. Enter the most recent three-year cohort default rate reported by the U.S. Department of Education for this institution, if applicable. \*
If Not Applicable, indicate "0".

0

70

25. 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. \*
If none, indicate "0".

n

# Offerings

# 2022 BPPE Annual Report - Institution - Offerings

Display Instructions for #27 - #37 (Toggle)

Not Checked

# Instructions

(Printer Friendly Annual Report Instructions Document)

- 27. Total number of students enrolled at this institution in the reporting year. Indicate the number of students attending and/or enrolled in all programs at your institution (minus the number of students in the reporting year who cancelled during the cancellation period) January 1st through December 31st.
- 28. Number of Doctorate Degree Programs Offered? Indicate the number of Doctorate degree Programs the institution offered for the reporting year. (Number of Programs not Students)

- 29. Number of Students enrolled in Doctorate programs at this institution? Indicate the number of students enrolled and/or active in all Doctorate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.
- **30. Number of Master Degree Programs Offered?** Indicate the number of Master degree Programs the institution offered for the reporting year. (Number of Programs not Students)
- **31. Number of Students enrolled in Master programs at this institution?** Indicate the number of students enrolled and/or active in all Master programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.
- **32. Number of Bachelor Degree Programs Offered?** Indicate the number of Bachelor degree Programs the institution offered for the reporting year. (Number of Programs not Students)
- **33.** Number of Students enrolled in Bachelor programs at this institution? Indicate the number of students enrolled and/or active in all Bachelor programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.
- **34. Number of Associate Degree Programs Offered?** Indicate the number of Associate degree Programs offered for the reporting year. (Number of Programs not Students)
- **35.** Number of Students enrolled in Associate programs at this institution? Indicate the number of students enrolled and/or active in all Associate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.
- **36. Number of Diploma or Certificate Programs Offered?** Indicate the number of Diploma or Certificate Programs offered for the reporting year. (Number of Programs not Students)
- 37. Number of Students enrolled in diploma or certificate programs at this institution? Indicate the number of students enrolled and/or active in all diploma/certificate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period.
- 27. Total number of students enrolled at this institution in the reporting year. Indicate the number of students attending and/or enrolled in all programs at your institution (minus the number of students in the reporting year who cancelled during the cancellation period) January 1st through December 31st . \*

If none, indicate "0".

28. Number of Doctorate Degree Programs Offered? Indicate the number of Doctorate degree Programs the institution offered for the reporting year. (Number of Programs not Students) \*
If none, indicate "0".

0

29. Number of Students enrolled in Doctorate programs at this institution? Indicate the number of students enrolled and/or active in all Doctorate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \*

If none, indicate "0".

0

30. Number of Master Degree Programs Offered? Indicate the number of Master degree Programs the institution offered for the reporting year. (Number of Programs not Students) \*
If none, indicate "0".

0

31. Number of Students enrolled in Master programs at this institution? Indicate the number of students enrolled and/or active in all Master programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \*

If none, indicate "0".

0

32. Number of Bachelor Degree Programs Offered? Indicate the number of Bachelor degree Programs the institution offered for the reporting year. (Number of Programs not Students) \*
If none, indicate "0".

0

33. Number of Students enrolled in Bachelor programs at this institution? Indicate the number of students enrolled and/or active in all Bachelor programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \*

If none, indicate "0".

0

34. Number of Associate Degree Programs Offered? Indicate the number of Associate degree Programs offered for the reporting year. (Number of Programs not Students) \*

If none, indicate "0".

0

35. Number of Students enrolled in Associate programs at this institution? Indicate the number of students enrolled and/or active in all Associate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \*

If none, indicate "0".

n

36. Number of Diploma or Certificate Programs
Offered? Indicate the number of Diploma or Certificate
Programs offered for the reporting year. (Number of
Programs not Students) \*
If none, indicate "0".

18

37. Number of Students enrolled in diploma or certificate programs at this institution? Indicate the number of students enrolled and/or active in all diploma/certificate programs at your institution in the reporting year as of January 1st through December 31st, minus the number of students who cancelled during the cancellation period. \*
If none, indicate "0".

. .....

222

**Total Program Count** 

18

# Website / Uploads

2022 BPPE Annual Report - Institution - Website and Required Uploads

An institution that maintains a website, shall provide on the homepage of that website, clear and conspicuous links to the most recent Annual Report submitted to the Bureau, the Catalog, and School Performance Fact Sheet (CEC §94913)\*\*.

<sup>\*\*</sup>The Bureau recommends a portion of the school's website dedicated to providing students with the required information below.

Jploads for Documents must be in F and will be rejected by BPPE staff.	PDF format. Other formatting may be too large to upload
nstitution's Website	
www.employedsecurity.org	
38. Upload School Performance	
Fact Sheet * Required file format = PDF	39. Upload Catalog * Required file format = PDF
Portfolio2.pdf	2024StudentCatalog.pdf
40. Upload Enrollment Agreement * Required file format = PDF	
Enrollment2024.docx	
The file upload facility below (#41) is documentation. The inital submissio	s ONLY for use when BPPE requests additional supporting on of the Annual Report does not require any action below.
41. General File Upload (only use as Recommended file format = PDF	s directed by BPPE staff)
nalyst Review	
Analyst Review	
Status	
Need Additional Information	
Institutions: Please a	address all comments and
checked items befor	re re-submitting this workflow.
Staff Comments:	
Sending back per Institutions re	equest.
	taff Comments Above, If Applicable:

Item 38. I uploaded a new Portfolio.2.pdf containing the corrected SPFS forms, at the request of the Compliance Officer, Phillip Mitchell.

INSTITUTIONS: Provide explanation or resolution for all items addressed in the Financial Statement area, #5 above.



# 2022 Annual Report

#### Program Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Program Name: BATON TRAINING CERTIFICATION

Your request number is DCA-BPPE-Program-038599.

#### Next Steps:

- 1. Complete submission of Institution Data; OR
- Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



## 2022 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Program Name: Baton Refresher

Your request number is DCA-BPPE-Program-038587.

#### Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - 5. Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Program Name: CHEMICAL AGENT

Your request number is DCA-BPPE-Program-038597.

#### Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Program Name: Customer Service 8 hours

Your request number is DCA-BPPE-Program-038588.

#### Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



#### 2022 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Program Name: Customer Service 40 Hours

Your request number is DCA-BPPE-Program-038589.

# Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



## 2022 Annual Report

# Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: FIREARMS CERTIFICATION

Your request number is DCA-BPPE-Program-038600.

# Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



## 2022 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: FIREARMS REQUALIFICATION

Your request number is DCA-BPPE-Program-038601.

#### Next Steps:

- 1. Complete submission of Institution Data; OR
- Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.

# 2022 Program Data



#### Thank You

# 2022 Annual Report

Program Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Program Name: FIRST AID CPR AED

Your request number is DCA-BPPE-Program-038598.

# Next Steps:

- 1. Complete submission of Institution Data; OR
- Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - 5. Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



## 2022 Annual Report

# Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: Guard Card Annual Refresher

Your request number is DCA-BPPE-Program-038590.

#### Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - 5. Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report

# Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: LOGISTICS AND SUPPLY CHAIN PROFESSIONAL

Your request number is DCA-BPPE-Program-038595.

# Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report

## Program Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Program Name: LOGISTICS AND WAREHOUSE TECHNICIAN

Your request number is DCA-BPPE-Program-038596.

#### Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - 5. Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report

# Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: OSHA 10 General Industry Safety

Your request number is DCA-BPPE-Program-038594.

#### Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report

## Program Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Program Name: OSHA 30 Hour General Industry Safety

Your request number is DCA-BPPE-Program-038592.

# Next Steps:

- 1. Complete submission of Institution Data; OR
- 2. Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report

# Program Data Submission:

Institution Name: Employed Security Service Center, Inc.

Institution Code: 35079813

Program Name: PRIVATE SECURITY OFFICER (ARMED)

Your request number is DCA-BPPE-Program-038593.

# Next Steps:

- 1. Complete submission of Institution Data; OR
- Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report

## Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: PRIVATE SECURITY OFFICER ARMED & SCHOOL SECURITY OFFICER

Your request number is DCA-BPPE-Program-038651.

# Next Steps:

- 1. Complete submission of Institution Data; OR
- Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



# 2022 Annual Report

# Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: PRIVATE SECURITY OFFICER (UNARMED)

Your request number is DCA-BPPE-Program-038650.

# Next Steps:

- 1. Complete submission of Institution Data; OR
- Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.



## 2022 Annual Report

#### Program Data Submission:

Institution Name: Employed Security Service Center, Inc.
Institution Code: 35079813

Program Name: School Security Officer

Your request number is DCA-BPPE-Program-038591.

# Next Steps:

- 1. Complete submission of Institution Data; OR
- Complete submission of ALL approved Program Data; OR
- 3. Complete submission of Branch Location Data (if applicable); OR
- 4. Complete submission of Satellite Location Data (if applicable); OR
  - Finalize the submission package by choosing 'Submit To BPPE' from the Dashboard.