| Response Details | |
|-----------------------|------------------------------|
| ID: | 40275567 |
| Timestamp: | 30 Jul, 2019 08:55:32 AM PDT |
| IP Address: | 161.6.128.220 |
| Time Taken: | 479 seconds |
| Back Button Usage: | Not used |
| Score: | 0.0 |
| Survey Language: | English |
| Source Identifier: | |
| Email Address: | |
| Email List: | |

| Integration Tags | |
|---------------------|--|
| External Reference: | |
| Custom Variable 1: | |
| Custom Variable 2: | |
| Custom Variable 3: | |
| Custom Variable 4: | |
| Custom Variable 5: | |

| Geo Coding | ③ |
|------------|----------|
| Country: | US |
| Region: | KY |
| Latitude: | 0.0 |
| Longitude: | 0.0 |
| Radius: | 0.0 |
| | |

Questions marked with a * are required

Institution Name:

Western Kentucky University

>> Public

>> Southern Region (i.e., AL, AR, FL, GA, KY, LA, MD, MS, NC, SC, TN, TX, VA, WV)

^{*} Institution Type: Details

^{*} Institution Location/Region: Details

^{*} Do you have a CACREP-accredited REHABILITATION COUNSELING program accredited under the CORE standards? (This does not include the Dually accredited Clinical Mental Health Counseling and Clinicals Rehabilitation Counseling program or Clinical Rehabilitation Counseling, which

| will both be options later in the survey) |
|--|
| » No |
| * Do you currently have one or more counseling programs accredited under the 2001 Standards? |
| » No |
| |
| * Do you currently have one or more counseling programs accredited under the 2009 CACREP Standards? |
| > Yes |
| |
| * Do you have a CACREP-accredited ADDICTION COUNSELING program under the 2009 Standards? |
| » No |
| * Do you have a CACREP-accredited CAREER COUNSELING program under the 2009 Standards? (Select one option) |
| » No |
| * Do you have a CACREP-accredited CLINICAL REHABILITATION COUNSELING program that is dually-accredited as a CLINICAL MENTAL |
| HEALTH COUNSELING program under the 2009 Standards? |
| » No |
| * Do you have a CACREP-accredited CLINICAL MENTAL HEALTH COUNSELING program under the 2009 Standards? |
| Yes |
| What is the minimum number of credit (semester) hours required for your CLINICAL MENTAL HEALTH COUNSELING degree? |
| 60 |
| |
| How many students are currently enrolled in your CLINICAL MENTAL HEALTH COUNSELING program? |
| 29 |
| |
| How many students graduated from your CLINICAL MENTAL HEALTH COUNSELING program in the past year? |
| 16 |
| |
| * To the best of your knowledge, what is the completion rate of students from your CLINICAL MENTAL HEALTH COUNSELING program? Details |
| >> 98% |
| |
| * To the best of your knowledge, what is the licensure [or certification] examination pass rate of students graduating from your CLINICAL MENTAL HEALTH COUNSELING program? Details |
| » 100% |
| * To the best of your knowledge, what is the job placement rate of graduates from your CLINICAL MENTAL HEALTH COUNSELING program who |
| were actively seeking employment? Details |
| >> 100% |
| * Within your academic unit, do you have a second program accredited as a CLINICAL MENTAL HEALTH COUNSELING program? Details |

| » No |
|--|
| * Do you have a CACREP-accredited MARRIAGE, COUPLE, AND FAMILY COUNSELING program under the 2009 Standards? * Yes |
| |
| What is the minimum number of credit (semester) hours required for your MARRIAGE, COUPLE, AND FAMILY COUNSELING degree? 60 |
| How many students are currently enrolled in your MARRIAGE, COUPLE, AND FAMILY COUNSELING program? |
| 12 |
| How many students graduated from your MARRIAGE, COUPLE, AND FAMILY COUNSELING program in the past year? 4 |
| * To the best of your knowledge, what is the completion rate of students from your MARRIAGE, COUPLE, AND FAMILY COUNSELING program? Details 99% |
| * To the best of your knowledge, what is the licensure [or certification] examination pass rate of students graduating from your MARRIAGE, COUPLE, AND FAMILY COUNSELING program? Details * 100% |
| * To the best of your knowledge, what is the job placement rate of graduates from your MARRIAGE, COUPLE, AND FAMILY COUNSELING program who were actively seeking employment? Details **Details** **D |
| * Do you have a CACREP-accredited SCHOOL COUNSELING program under the 2009 Standards? * Yes |
| What is the minimum number of credit (semester) hours required for your SCHOOL COUNSELING degree? 48 |
| How many students are currently enrolled in your SCHOOL COUNSELING program? 11 |
| How many students graduated from your SCHOOL COUNSELING program in the past year? 11 |
| * To the best of your knowledge, what is the completion rate of students from your SCHOOL COUNSELING program? Details * 100% |

* To the best of your knowledge, what is the licensure [or certification] examination pass rate of students graduating from your SCHOOL

| COUNSELING program? Details |
|---|
| » 100% |
| * To the best of your knowledge, what is the job placement rate of graduates from your SCHOOL COUNSELING program who were actively seeking employment? Details |
| » 99% |
| * Within your academic unit, do you have a second program accredited as a SCHOOL COUNSELING program? Details |
| » No |
| * Do you have a CACREP-accredited STUDENT AFFAIRS AND COLLEGE COUNSELING program under the 2009 Standards? |
| » No |
| * Do you have a CACREP-accredited COUNSELOR EDUCATION AND SUPERVISION doctoral program under the 2009 Standards? No |
| * Do you have one or more counseling programs accredited under the 2016 CACREP Standards? No |
| How many applications for your MASTER'S level CACREP-accredited program(s) did you receive in the past year? |
| 44 |
| * Non-CACREP-Accredited Programs: Please select all programs offered by your academic counseling unit that are NOT ACCREDITED by CACREP. |
| Addiction Counseling |
| >> Career Counseling |
| >> College Counseling and Student Affairs |
| * Are you able to provide racial/ethnic background information about students enrolled in your CACREP-accredited MASTER'S level COUNSELING program(s)? Details |
| » No |
| * Are you able to provide information about the number of students with disabilities enrolled in your CACREP-accredited MASTER'S level COUNSELING program(s)? Details |
| Yes |
| Male |
| 0 |
| Female |
| 0 |
| Transgender/Gender Non-Conforming |
| 0 |

| * Are you able to provide racial/ethnic background information about students enrolled in your CACREP-accredited COUNSELOR EDU AND SUPERVISION doctoral program? Details | ICATION |
|---|---------|
| >> Not Applicable (i.e., "I do not have an accredited CES doctoral program.") | |
| How many FULL-TIME faculty members do you have in your academic counseling unit? | |
| 6 | |
| | |
| * Are you able to provide racial/ethnic background information about FULL-TIME faculty members in your academic counseling unit? D | etails |
| Yes | |
| American Indian or Alaska Native | |
| 0 | |
| Asian | |
| 0 | |
| Black or African American | |
| 0 | |
| Hispanic or Latino | |
| 0 | |
| Native Hawaiian or Other Pacific Islander | |
| 0 | |
| White | |
| 1 | |
| Multiracial | |
| 0 | |
| Other/Undisclosed | |
| 0 | |
| Nonresident Alien | |
| 0 | |
| | |
| American Indian or Alaska Native | |
| 0 | |
| Asian | |
| 0 | |
| Black or African American | |
| 3 | |
| Hispanic or Latino | |
| 0 | |
| Native Hawaiian or Other Pacific Islander | |
| 0 | |
| White | |
| 2 | |

| Multiracial | |
|--|--------------|
| 0 | |
| Other/Undisclosed | |
| 0 | |
| Nonresident Alien | |
| 0 | |
| | |
| American Indian or Alaska Native | |
| 0 | |
| Asian | |
| 0 | |
| Black or African American | |
| 0 | |
| Hispanic or Latino | |
| 0 | |
| Native Hawaiian or Other Pacific Islander | |
| 0 | |
| White | |
| 0 | |
| Multiracial | |
| 0 | |
| Other/Undisclosed | |
| 0 | |
| Nonresident Alien | |
| 0 | |
| | |
| Would you be willing to pay a 3% convience fee on credit credit card payments for accreditation fees? | |
| » No | |
| | |
| Please provide a contact email address. This address will be used if the CACREP office has any questions about the information prov survey. | ided in this |
| jillduba.sauerheber@wku.edu | |
| | |
| | |