

1967

Fall Enrollment 1967-68

UNO Office of Institutional Effectiveness
University of Nebraska at Omaha

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COMPLIANCE REPORT OF INSTITUTIONS OF HIGHER EDUCATION
Under Title VI of the Civil Rights Act of 1964
(Fall 1967)

PART I—REPORT IDENTIFICATION (See instruction A)

THIS REPORT IS FOR: (check one)

1 UNDERGRADUATE 2 GRADUATE OR PROFESSIONAL

NAME OF CONSTITUENT INSTITUTION COVERED BY THIS REPORT FERRIS STATE UNIVERSITY OF OHIO	ADDRESS (Number, Street, City, State, Zip Code) 60th and Dodge Streets (Box 608 Downtown Station) Omaha, Nebraska 68101
NAME OF PARENT INSTITUTION IF DIFFERENT FROM ABOVE	ADDRESS (Number, Street, City, State, Zip Code)

PART II—ADMISSIONS PRACTICES

1	Are the admissions standards and policies of this institution free of discrimination on the grounds of race, color, and national origin? 1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	2	CONTINUED
			C CORRESPONDENCE WITH SCHOOLS OF MINORITY ENROLLMENT <input type="checkbox"/>
2	Are informational, recruitment and promotional activities for admissions free of discrimination on the grounds of race, color, and national origin? 1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	D	ANNOUNCEMENTS IN PUBLICATIONS WHICH REACH NONWHITE GROUPS <input type="checkbox"/>
		E	STATEMENTS OF NONDISCRIMINATION IN CATALOGS OR APPLICATION FORMS <input type="checkbox"/>
		F	PARTICIPATION IN PRE-COLLEGE EDUCATION PROGRAMS FOR MINORITY GROUP STUDENTS (Attach description if possible) <input type="checkbox"/>
		G	OTHER METHODS Please specify <input type="checkbox"/>
		A INTERVIEW BY ALUMNI <input type="checkbox"/>	
3	Colleges and universities have used several alternative methods to inform Negro and "Other" applicants of opportunities for admission. Examples of these alternatives are listed below. Please check those steps your institution has taken.	B	VISITS OR MEETINGS AT SCHOOLS WITH MINORITY ENROLLMENT <input type="checkbox"/>
		C	INTERVIEW BY ALUMNI <input type="checkbox"/>

PART III—STUDENTS ENROLLED (1967 fall term)

ITEM	NUMBER OF STUDENTS				TOTAL	
	WHITE	NEGRO	OTHER	TOTAL		
1	Number of students enrolled in this institution for fall term 1967 (See instructions B and C) 4218 181 43 4542					
2	Number of students included under item 1 who are foreign students studying in the U.S. under a student or other temporary visa 6 2 6 14					
3	A HOW WAS THE ABOVE INFORMATION ON ENROLLMENT OBTAINED? (CHECK ONE) 1 <input type="checkbox"/> VISUAL SURVEY 2 <input type="checkbox"/> REGISTRATION RECORDS 3 <input type="checkbox"/> OTHER (SPECIFY)	1966-67			4415	
		1965-66			4533	
		1964-65			4080	
		1963-64			3601	
4	Number of students residing in college-owned housing none none none none					
5	If your institution awards grants-in-aid to students of exceptional athletic ability, give number of students receiving these awards (See instruction D) 73 19 92					
	If the institution does NOT have an ROTC program, check here <input type="checkbox"/> and omit the following two items					
6	A GIVE NUMBER OF MALE STUDENTS PARTICIPATING IN THE BASIC TRAINING OF THE ROTC PROGRAM 190	B GIVE NUMBER OF GRADUATES OF THE CLASS OF JUNE 1967 WHO RECEIVED A COMMISSION (See instruction E) 8	NO. OF RECIPIENTS			DOLLAR VALUE OF AID
			A WHITE 920	B NEGRO 133	C OTHER 11	D TOTAL 1064
7	What is the distribution of student financial aid (other than for athletics) among students enrolled in programs leading to a degree, diploma, certificate or other formal award (See instruction D)	A WHITE 920				
		B NEGRO 133				
PART IV—SERVICES, FACILITIES, ACTIVITIES AND PROGRAMS						
1	Indicate whether or not "Negro" and/or "Other" students who are currently enrolled are free to participate in the following activities, and have access, on a nonsegregated basis, to the following facilities, without regard to race, color, and national origin					
	A ALL CAMPUS HOUSING, INCLUDING DORMITORIES N/A	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	E ALL UNIVERSITY ADMINISTERED STUDENT FINANCIAL AID (INCLUDING SCHOLARSHIPS, FELLOWSHIPS, STUDENT LOANS & TRAINERSHIP STIPENDS) (SEE INSTR. D)	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO		
B	ALL COLLEGE SUPPORTED HOUSING (SEE INSTR. F) N/A	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	F ALL UNIVERSITY SUPPORTED EXTRA-CURRICULAR ACTIVITIES (E.G. ATHLETIC, CULTURAL, AND SOCIAL ACTIVITIES AND FACILITIES)	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO		
	C ALL AUXILIARY FACILITIES SUCH AS LIBRARIES, LABORATORIES, CAFETERIAS, COMMERCIAL CONCESSIONS, OFFICES, STUDENT UNIONS AND REST ROOMS	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	G ALL WORK-STUDY, AND JOB REFERRAL PROGRAMS AND EMPLOYMENT AND JOB-PLACEMENT SERVICES (SEE INSTR. F)	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO		
D	ALL ACTIVITIES AND FACILITIES FOR THEIR PARENTS OR OTHER VISITORS	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	H ALL OFF-CAMPUS HOUSING LISTED BY THE COLLEGE (SEE INSTR. F)	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO		
	The following two items are for clinical and practical training (Medical, education, social work, etc.)					
A	ARE STUDENTS ASSIGNED TO TRAINING WITHOUT REGARD TO RACE, COLOR, OR NATIONAL ORIGIN OF BOTH THE STUDENT AND THE PATIENT OR CLIENT?		B DOES THE TRAINING FACILITY OR INSTITUTION USED FOR CLINICAL OR PRACTICAL TRAINING (HOSPITAL, SCHOOL, WELFARE AGENCY, ETC.) PROVIDE SERVICES TO THE PUBLIC WITHOUT REGARD TO RACE, COLOR AND NATIONAL ORIGIN?			
	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO		

CERTIFICATION

I CERTIFY that the information given above is true and correct to the best of my knowledge and belief. /s/



COMPLIANCE REPORT OF INSTITUTIONS OF HIGHER EDUCATION
Under Title VI of the Civil Rights Act of 1964
(Fall 1967)

PART I—REPORT IDENTIFICATION (See instruction A)

THIS REPORT IS FOR: (Check one)

- 1 UNDERGRADUATE 2 GRADUATE OR PROFESSIONAL

NAME OF CONSTITUENT INSTITUTION COVERED BY THIS REPORT
ADOLPHUS UNIVERSITY OF OHIO

ADDRESS (Number, Street, City, State, ZIP Code)
**606H and Lodge Streets (Box 598 Downtown Station)
Columbus, Nebraska 68108**

NAME OF PARENT INSTITUTION IF DIFFERENT FROM ABOVE

ADDRESS (Number, Street, City, State, ZIP Code)

PART II—ADMISSIONS PRACTICES

1	Are the admissions standards and policies of this institution free of discrimination on the grounds of race, color, and national origin? 1 <input checked="" type="checkbox"/> YES 2 <input type="checkbox"/> NO	2	CONTINUED				
		C	CORRESPONDENCE WITH SCHOOLS OF MINORITY ENROLLMENT				<input checked="" type="checkbox"/>
2	Are informational, recruitment and promotional activities for admissions free of discrimination on the grounds of race, color, and national origin? 1 <input checked="" type="checkbox"/> YES 2 <input type="checkbox"/> NO	D	ANNOUNCEMENTS IN PUBLICATIONS WHICH REACH NONWHITE GROUPS				<input checked="" type="checkbox"/>
		E	STATEMENTS OF NONDISCRIMINATION IN CATALOGS OR APPLICATION FORMS				<input checked="" type="checkbox"/>
3	Colleges and universities have used several alternative methods to inform Negro and "Other" applicants of opportunities for admission. Examples of these alternatives are listed below. Please check those steps your institution has taken.	F	PARTICIPATION IN PRE-COLLEGE EDUCATION PROGRAMS FOR MINORITY GROUP STUDENTS (A brief description if possible)				<input type="checkbox"/>
		G	OTHER METHODS Please specify				<input type="checkbox"/>
		A	INTERVIEW BY ALUMNI				<input type="checkbox"/>
		B	VISITS OR MEETINGS AT SCHOOLS WITH MINORITY ENROLLMENT				<input checked="" type="checkbox"/>

PART III—STUDENTS ENROLLED (1967 fall term)

ITEM	NUMBER OF STUDENTS			
	WHITE	NEGRO	OTHER	TOTAL
1	Number of students enrolled in this institution for fall term 1967 (See instructions B and C)			
		204	16	220
2	Number of students included under item 1 who are foreign students studying in the U.S. under a student or other temporary visa			
		1		1
3	A HOW WAS THE ABOVE INFORMATION ON ENROLLMENT OBTAINED? (CHECK ONE)			
	1 <input type="checkbox"/> VISUAL SURVEY 2 <input type="checkbox"/> REGISTRATION RECORDS 3 <input type="checkbox"/> OTHER (SPECIFY)			
	If information is available, number of students enrolled in this institution for the following school years (estimates are acceptable):			
		1966-67		
	1965-66			
	1964-65			
	1963-64			
4	Number of students residing in college-owned housing			
5	If your institution awards grants-in-aid to students of exceptional athletic ability, give number of students receiving these awards (See instruction D)			
6	If the institution does NOT have an ROTC program, check here <input type="checkbox"/> and omit the following two items			
	A	GIVE NUMBER OF MALE STUDENTS PARTICIPATING IN THE BASIC TRAINING OF THE ROTC PROGRAM		
	B	GIVE NUMBER OF GRADUATES OF THE CLASS OF JUNE 1967 WHO RECEIVED A COMMISSION (See instruction E)		
7	What is the distribution of student financial aid (other than for athletics) among students enrolled in programs leading to a degree, diploma, certificate or other formal award (See instruction D)			
	A	WHITE	NO. OF RECIPIENTS	DOLLAR VALUE OF AID
	B	NEGRO		
	C	OTHER		
	D	TOTAL		

PART IV—SERVICES, FACILITIES, ACTIVITIES AND PROGRAMS

1 Indicate whether or not "Negro" and/or "Other" students who are currently enrolled are free to participate in the following activities, and have access, on a nonsegregated basis, to the following facilities, without regard to race, color, and national origin

A	ALL CAMPUS HOUSING, INCLUDING DORMITORIES	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	E	ALL UNIVERSITY ADMINISTERED STUDENT FINANCIAL AID (INCLUDING SCHOLARSHIPS, FELLOWSHIPS, STUDENT LOANS & TRAINERSHIP STIPENDS) (SEE INSTR. D)	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO
	B	ALL COLLEGE SUPPORTED HOUSING (SEE INSTR. F)		1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	F
C	ALL AUXILIARY FACILITIES SUCH AS LIBRARIES, LABORATORIES, CAFETERIAS, COMMERCIAL CONCESIONS, OFFICES, STUDENT UNIONS AND REST ROOMS	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	G	ALL WORK-STUDY, AND JOB REFERRAL PROGRAMS AND EMPLOYMENT AND JOB-PLACEMENT SERVICES (SEE INSTR. F)	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO
		D			ALL ACTIVITIES AND FACILITIES FOR THEIR PARENTS OR OTHER VISITORS
H	ALL OFF-CAMPUS HOUSING LISTED BY THE COLLEGE (SEE INSTR. F)	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO	B	DOES THE TRAINING FACILITY OR INSTITUTION USED FOR CLINICAL OR PRACTICAL TRAINING (HOSPITAL, SCHOOL, WELFARE AGENCY, ETC.) PROVIDE SERVICES TO THE PUBLIC WITHOUT REGARD TO RACE, COLOR AND NATIONAL ORIGIN?	1 <input type="checkbox"/> YES 2 <input type="checkbox"/> NO
		A			ARE STUDENTS ASSIGNED TO TRAINING WITHOUT REGARD TO RACE, COLOR, OR NATIONAL ORIGIN OF BOTH THE STUDENT AND THE PATIENT OR CLIENT?

2 The following two items are for clinical and practical training (Medical, education, social work, etc.)

CERTIFICATION