



Bureau for Private Postsecondary Education
 2535 Capitol Oaks Drive, Suite 400, Sacramento, CA 95833
 P.O. Box 980818, West Sacramento, CA 95798-0818
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NOTICE TO COMPLY – CA 1927641 0614 (Ed. Code § 94935, 5 CCR § 75010)

Institution Name:	Grace Mission University	Institution Telephone:	714.525.0088
Institution Code:	1927641	Administrator Name:	Dr. Kim, Ph.D.
Street Address:	1645 West Valencia Drive Fullerton, California 92833	Date of Inspection:	06/03/14

Nature and Facts of the Violation(s):

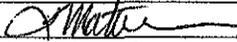
Code of Regulations	Subsection and Description
§74190 – Agent for Service of Process.	<p>The institution shall include in its Form Application 94886 the name, physical address, telephone number, fax number, and e-mail address for the agent for service of process in California as required by section 94943.5 of the Code. The agent shall be at an address other than the address of the institution or any branch. The agent must confirm the information and acknowledge in writing that he or she is the designated agent for service of process. The information shall be kept current pursuant to section 74190.</p> <p>Institution failed to maintain an agent for service of process in California and at an address other than the address of the institution or any branch.</p>
§76215 - Student Tuition Recovery Fund Disclosures.	<p>(a) A qualifying institution shall include the following statement on both its enrollment agreement for an educational program and its current schedule of student charges: "You must pay the state-imposed assessment for the Student Tuition Recovery Fund (STRF) if all of the following applies to you: 1. You are a student in an educational program, who is a California resident, or are enrolled in a residency program, and prepay all or part of your tuition either by cash, guaranteed student loans, or personal loans, and 2. Your total charges are not paid by any third-party payer such as an employer, government program or other payer unless you have a separate agreement to repay the third party. You are not eligible for protection from the STRF and you are not required to pay the STRF assessment, if either of the following applies: 1. You are not a California resident, or are not enrolled in a residency program, or 2. Your total charges are paid by a third party, such as an employer, government program or other payer, and you have no separate agreement to repay the third party." Institution failed to include the required statement verbatim.</p>

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Inspector's Initial: *AM*

Administrator's Initial: *KMN*

Only minor violations are listed on the Notice to Comply.
Additional violations may have been identified that will be forwarded to the Enforcement Unit for further review.

Inspector's Name	Jeanne Matsumoto
Inspector's Signature	
Institution Administrator Name/Title:	Dr. Kim, Ph.D., Dean of Academics
Institution Administrator's Signature:	

Education Code can be located at: http://www.bppe.ca.gov/lawsregs/ppe_act.shtml

Code of Regulations can be located at: <http://www.bppe.ca.gov/lawsregs/regs.shtml>

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Inspector's Initial: *AM*

Administrator's Initial: *KAW*

RETURN THIS FORM WITHIN THE SPECIFIED TIME FRAME WITH EITHER: 1) VERIFICATION OF COMPLIANCE OR
2) A NOTICE OF DISAGREEMENT

IMPORTANT COMPLIANCE NOTICE

California Education Code §94935 and California Code of Regulations §75010 provide that the Bureau for Private Postsecondary Education (Bureau) shall issue a Notice to Comply for minor violations detected during a compliance inspection by the Bureau.

By no later than 30 days from the date of the inspection, you must either: 1) Remedy the noncompliance item(s), sign the below declaration and submit this form to the Bureau, along with documentation describing how compliance was achieved; or 2) File with the Bureau a written notice of disagreement, specifying the minor violation(s) described in the Notice to Comply with which you disagree, and appealing it by requesting an informal office conference. If a written notice of disagreement is not timely filed with the Bureau, the right to appeal is deemed to have been waived.

Failure to timely remedy the noncompliance item(s) or file a written request for an informal office conference may result in the Bureau taking administrative enforcement action.

DECLARATION

Attached to this document is a list describing how compliance was achieved for each violation and supporting documentation. I declare under penalty of perjury that all violations identified in this Notice to Comply are corrected as described in the attachment.

Signature

Date

Print Name and Title

THIS DECLARATION OR A NOTICE OF DISAGREEMENT MUST BE SUBMITTED TO THE BUREAU BY: **July 5, 2014**

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Inspector's Initial: *MC*

Administrator's Initial: *KYW*