



Bureau for Private Postsecondary Education
 2535 Capitol Oaks Drive, Suite 400, Sacramento, CA 95833
 P.O. Box 980818, West Sacramento, CA 95798-0818
 P (916) 431-6959 F (916) 263-1897 www.bppe.ca.gov
NOTICE TO COMPLY – CA 747722012 0617 (Ed. Code § 94935, 5 5, CCR § 75010)



Institution Name:	Cambridge College, Inc.	Institution Telephone:	(909) 635-0250
Institution Code:	74722012	Administrator Name:	Rita Clemons
Street Address:	9227 Haven Avenue, Ste. 320 Rancho Cucamonga, CA 91730	Date of Inspection:	June 19, 2017

Nature and Facts of the Violation(s), Including a Reference to the Statute or Regulation Violated, and Manner in Which the Institution Must Correct the Violation to Achieve Compliance:

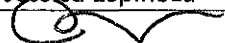
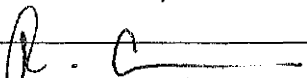
MISCELLANEOUS

Education Code or Code of Regulations	Subsection, Description, and Required Correction
5, CCR §71750(c)(1)	<p>Withdrawals and Refunds.</p> <p>(c) A pro rata refund pursuant to section 94919(c) or 94920(d) or 94927 of the Code shall be no less than the total amount owed by the student for the portion of the educational program provided subtracted from the amount paid by the student, calculated as follows:</p> <p>(1) The amount owed equals the daily charge for the program (total institutional charge, divided by the number of days or hours in the program), multiplied by the number of days student attended, or was scheduled to attend, prior to withdrawal.</p> <p>The institution failed to maintain a policy providing a pro rata refund of nonfederal student financial aid funds paid for institutional charges for the institution's Intensive Courses Program. The institution's policy does not include a pro rata refund for students completing less than 60 percent of the program.</p> <p>To remedy this violation, the institution shall provide documentation of the institution's established policy and procedure for calculating and issuing accurate refunds for students enrolled in the Intensive Courses Program.</p> <p>The policy and procedure shall be submitted with the institution's response to the NTC and the last page of this document within the specified time frame.</p>

Notice to Comply – CA 74722012 0617

Inspector's Initial: *[Signature]*
 Administrator's Initial: *[Signature]*


Only minor violations are listed on this Notice to Comply.

Inspector's Name	Jessica Espinoza
Inspector's Signature	
Institution Administrator Name/Title:	Rita Clemons/ Director
Institution Administrator's Signature:	

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

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

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Inspector's Initial: 

Administrator's Initial: 

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 19, 2017**.

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Inspector's Initial: *[Signature]*

Administrator's Initial: *[Signature]*