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H]aY'HU_Yb.	2321 seconds
6UW_'6 ihhcb I gU[Y.	Not used
GWcfY.	0.0
G if jYm @Ub [ i U[Y.	English
Gc i fWY':XYbh]Z]Yf.	
9 a U]' 5XXfYgg.	
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Integration Tags	
9 IhYfbU' FYZfYbWY.	
7 i g h c a ' J U f ] U V ' Y '%.	
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Geo Coding ⓘ	
7 c i b h f m .	US
FY[]cb.	NE
@Uh]h i XY.	0.0
@cb []]h i XY.	0.0
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Questions marked with a \* are required

Institution Name:

University of Nebraska at Omaha

\* Institution Type: [Details](#)

Ä Public

\* Institution Location/Region: [Details](#)

Ä North Central Region (i.e., IL, IN, IA, KS, MI, MN, MO, NE, ND, OH, OK, SD, WI)

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\* Do you have a CACREP-accredited REHABILITATION COUNSELING program accredited under CORE's Rehabilitation Counseling standards?

No

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\* Do you currently have one or more counseling programs accredited under the 2001 Standards?

No

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\* Do you currently have one or more counseling programs accredited under the 2009 CACREP Standards?

Yes

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\* Do you have a CACREP-accredited ADDICTION COUNSELING program under the 2009 Standards?

No

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\* Do you have a CACREP-accredited CAREER COUNSELING program under the 2009 Standards? (Select one option)

No

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\* 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

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\* Do you have a CACREP-accredited CLINICAL MENTAL HEALTH COUNSELING program under the 2009 Standards?

Yes

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What is the minimum number of credit (semester) hours required for your CLINICAL MENTAL HEALTH COUNSELING degree?

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How many students are currently enrolled in your CLINICAL MENTAL HEALTH COUNSELING program?

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How many students graduated from your CLINICAL MENTAL HEALTH COUNSELING program in the past year?

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\* To the best of your knowledge, what is the completion rate of students from your CLINICAL MENTAL HEALTH COUNSELING program? [Details](#)

Ä 95%

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\* 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](#)

Ä 95%

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\* 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](#)

Ä 93%

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\* Within your academic unit, do you have a second program accredited as a CLINICAL MENTAL HEALTH COUNSELING program? [Details](#)

Ä No

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\* Do you have a CACREP-accredited MARRIAGE, COUPLE, AND FAMILY COUNSELING program under the 2009 Standards?

Ä No

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\* Do you have a CACREP-accredited SCHOOL COUNSELING program under the 2009 Standards?

Ä Yes

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What is the minimum number of credit (semester) hours required for your SCHOOL COUNSELING degree?

48

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How many students are currently enrolled in your SCHOOL COUNSELING program?

55

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How many students graduated from your SCHOOL COUNSELING program in the past year?

13

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\* To the best of your knowledge, what is the completion rate of students from your SCHOOL COUNSELING program? [Details](#)

Ä 97%

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\* To the best of your knowledge, what is the licensure [or certification] examination pass rate of students graduating from your SCHOOL COUNSELING program? [Details](#)

Ä 100%

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\* 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](#)

Ä 100%

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\* Within your academic unit, do you have a second program accredited as a SCHOOL COUNSELING program? [Details](#)

Ä No

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\* Do you have a CACREP-accredited STUDENT AFFAIRS AND COLLEGE COUNSELING program under the 2009 Standards?

Ä No

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\* Do you have a CACREP-accredited COUNSELOR EDUCATION AND SUPERVISION doctoral program under the 2009 Standards?

Ä No

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\* Do you have one or more counseling programs accredited under the 2016 CACREP Standards?

Ä No

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How many applications for your MASTER'S level CACREP-accredited program(s) did you receive in the past year?

82

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\* Non-CACREP-Accredited Programs: Please select all programs offered by your academic counseling unit that are NOT ACCREDITED by CACREP.

Ä College Counseling and Student Affairs

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\* Are you able to provide racial/ethnic background information about students enrolled in your CACREP-accredited MASTER'S level COUNSELING program(s)? [Details](#)

Ä No

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\* 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](#)

Ä No

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\* Are you able to provide racial/ethnic background information about students enrolled in your CACREP-accredited COUNSELOR EDUCATION AND SUPERVISION doctoral program? [Details](#)

Ä Not Applicable (i.e., "I do not have an accredited CES doctoral program.")

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How many FULL-TIME faculty members do you have in your academic counseling unit?

5

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\* Are you able to provide racial/ethnic background information about FULL-TIME faculty members in your academic counseling unit? [Details](#)

Ä No

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Please provide a contact email address. This address will be used if the CACREP office has any questions about the information provided in this survey.

dkissinger@unomaha.edu

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