



We thank you for your time spent taking this survey.  
Your response has been recorded.

Below is a summary of your responses

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This survey is to be completed by all CACREP-accredited programs and must be submitted by December 31, 2023. NOTE: All data for this report should be from Academic Year 2022-2023. If you have any questions or need assistance in completing this survey, please contact the CACREP office at 703.535.5990 or [cacrep@cacrep.org](mailto:cacrep@cacrep.org).

Institution Name:

University of Nebraska Omaha

Institution Type:

- ☒ **Public**
- ☐ Non-Profit Private
- ☐ For-Profit

Institution's Headquarters

Nebraska

Do you have a CACREP-accredited ADDICTION COUNSELING program?

☐ Yes  
☒ No

Do you have a CACREP-accredited CAREER COUNSELING program?

☐ Yes  
☒ No

Do you have a CACREP-accredited CLINICAL MENTAL HEALTH COUNSELING program?

☒ Yes  
☐ No

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

60

How many students were enrolled in your CLINICAL MENTAL HEALTH COUNSELING program in the reporting period? If none, enter "0".

148

How many students graduated from your CLINICAL MENTAL HEALTH COUNSELING program in the reporting period? If none, enter "0".

44

What is the completion rate of students from your CLINICAL MENTAL HEALTH COUNSELING program?

0 10 20 30 40 50 60 70 80 90 100  
Percentage



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?

- ☐ No Exam
- ☐ 1-10%
- ☐ 11-20%
- ☐ 21-30%
- ☐ 31-40%
- ☐ 41-50%
- ☐ 51-60%
- ☐ 61-70%
- ☐ 71-80%
- ☐ 81-90%
- ☒ **91-100%**

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?

0 10 20 30 40 50 60 70 80 90 100

Percentage



Do you have a second CACREP-accredited CLINICAL MENTAL HEALTH COUNSELING program with a concentration/emphasis?

- ☐ Yes
- ☒ **No**

Do you have a CACREP-accredited dually-titled CLINICAL REHABILITATION/CLINICAL MENTAL HEALTH COUNSELING program?

- ☐ Yes

☒ **No**

Do you have a CACREP-accredited CLINICAL REHABILITATION COUNSELING program?

☐ Yes

☒ **No**

Do you have a CACREP-accredited COLLEGE COUNSELING AND STUDENT AFFAIRS or STUDENT AFFAIRS AND COLLEGE COUNSELING program?

☐ Yes

☒ **No**

Do you have a CACREP-accredited MARRIAGE, COUPLE, AND FAMILY COUNSELING program?

☐ Yes

☒ **No**

Do you have a CACREP-accredited REHABILITATION COUNSELING program?

☐ Yes

☒ **No**

Do you have a CACREP-accredited SCHOOL COUNSELING program?

☐ Yes

☒ **No**

How many total applications were received for all of your MASTER'S LEVEL CACREP-ACCREDITED DEGREE PROGRAMS in the reporting period? If none, enter "0".

Are you able to provide demographic information about students enrolled in your CACREP-accredited MASTER'S level COUNSELING program(s)?

- ☒ Yes  
☐ No

Master's Student Demographics: Please provide the number of students currently enrolled in your CACREP-accredited master's level program(s) for each category below. If you are unable to answer for a particular category or do not have any students that identify with a particular category, please enter "0".

	Male	Female	Non-Binary/Gender Fluid
American Indian or Native Alaskan	0	1	0
Asian	0	4	0
Black	4	4	0
Hawaiian Native or Pacific Islander	1	0	0
Hispanic	2	10	0
Two or More	2	3	0
Unknown/Other	0	0	0
White	20	95	0
International	1	1	0
Student Active Duty	0	0	0
Military Veteran	3	2	0
With a Disability	0	0	0

Do you have a CACREP-accredited COUNSELOR EDUCATION AND SUPERVISION program?

- ☐ Yes  
☒ No

Please select all programs offered by your academic counseling unit that

are NOT ACCREDITED by CACREP.

☒ **Degree Program Name**

Student Affairs, School Counseling

☐ Certificate Program Name

☐ All degree programs are CACREP accredited

Are you able to provide demographic information about FULL-TIME faculty members in your academic counseling unit?

☒ **Yes**

☐ No

FULL-TIME Faculty Demographics: Please provide the number of full-time faculty members in your academic counseling unit for each category below. If you are unable to answer for a particular category or do not have any students that identify with a particular category, please enter "0".

	Male	Female	Non-Binary/Gender Fluid
American Indian or Native Alaskan	0	0	0
Asian	2	0	0
Black	0	0	0
Native Hawaiian or Pacific Islander	0	0	0
Hispanic	0	0	0
Two or More	0	0	0
Unknown/Other	0	0	0
White	1	5	0
Veteran	1	0	0
With a Disability	0	0	0

The following questions relate to data CACREP is gathering that will inform the development of new services, policies and/or requirements. This data

will be aggregated and will not be identifiable to any program.

Does your counselor education unit operate on a cohort model?

- ☐ Yes for Masters program
- ☒ **No for Masters program**
- ☐ Yes for Doctoral program
- ☐ No for Doctoral program

If yes, how many years are expected to complete your Masters program?

na

If yes how many years are expected to complete your Doctoral program?

NA

What is the formula you use when you calculate program completion rates?

#accepted vs #completed

In calculating your completion rate, do you include students who:

- ☐ have withdrawn from graduate school completely?
- ☐ switch from one counseling specialty area to another (i.e., MCFC to CMHC)?
- ☐ transfer to another non-counseling graduate program?
- ☐ are dismissed from the program for academic reasons?
- ☐ are dismissed from the program for non-academic reasons?

☒ **Comments**

can only choose 1: we include students who have withdrawn, who transfer out, and who are dismissed.

What adjustments have you made to your program, if any, due to DEI requirements at your institution or in your state?

none, we are committed to DEI and include it in all efforts, the University is supportive of this

Which existing CACREP services do you find valuable?

- ☒ **Resources on the CACREP website**
- ☒ **CACREP Bulletin & Connection**
- ☐ Legislative alerts
- ☐ Notice of Federal grants
- ☒ **Designated staff point of contact**
- ☐ Other valuable services

Which potential CACREP services would you find valuable?

- ☐ Faculty job board
- ☒ **CACREP-only sessions at conferences**
- ☒ **Virtual drop-in office hours with CACREP staff**
- ☒ **Accredited-programs-only resources on the website (sample documents, teaching aids)**
- ☐ Other suggested potential services

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

Christine Chasek, christinechasek@unomaha.edu

Final comments? Please share them below:

REMINDER: Programs/Student Outcomes must be made publicly available on your program's website. The information to be posted includes the following four data points regarding each of your accredited specialty areas: (a) number of graduates in the past year, (b) completion rate, (c) licensure or certification examination pass rate, and (d) job placement rate of students/graduates. Posting a URL link to your completed Vital Statistics Survey report will satisfy this requirement.

Once this data has been posted, send the URL link to the location on your



Once this data has been posted, send the URL link to the location on your website via email to [cacrep@cacrep.org](mailto:cacrep@cacrep.org). If your program submitted a Vital Statistics Survey last year and you have previously posted program outcomes on the program website, you need to update your program outcomes report to reflect the most current data. If the URL link to the outcomes report changes when you update this information, you need to send a copy of the new URL link via email to [cacrep@cacrep.org](mailto:cacrep@cacrep.org).

You will NOT have an opportunity to receive a copy of your completed survey later. If you want a copy of your completed report, please ensure that you click the arrow at the bottom of the page and download the PDF.

☒ **I understand I need to download a copy of the completed survey for my own records**