ACCJC DIRECTORY REPORT

PLEASE COMPLETE AND RETURN THIS FORM BY MARCH 11, 2016 TO:

Accrediting Commission for Community and Junior Colleges
10 Commercial Blvd, Suite 204 Novato, CA 94949
Tel: 415-506-0234; FAX: 415-506-0238; E-mail: accjc@accjc.org

ACCJC DIRECTORY DATA

College:	**Los Angeles Trade-Technical College**
Superintendent/President:	Laurence B. Frank
College Address: City, State, Zip	400 West Washington Blvd., Los Angeles, CA 90015
College Telephone:	213.763.7000
College Fax:	
President's Telephone:	213.763.7052
President's Fax:	213.763.5366
President's Email:	franklb@lattc.edu
Website Address:	lattc.edu
Control/Ownership:	Public (State/local) two-year
System:	Los Angeles CCD
List Degrees:	Associates of Arts, Associate of Science, Associate Degree for Transfer
Certificates Awarded? (Yes/No)	Yes
Semester/Quarter?	Semester
First, Last, Next Accreditation:	Initial Accreditation: 1952; last comprehensive review: 2009; next comprehensive review: March 2016
Programmatic Accreditation:	
American Culinary Federation Education Foundation Accrediting Commission (ACFEFAC) Interstate Renewable Energy Council (IREC) National Automotive Technicians Education Foundation (NATEF)	

Accreditation Liaison Officer:	Leticia L. Barajas
ALO's Title:	Vice President, Academic Affairs & Workforce Development
ALO's Telephone:	213.763.7071
ALO's FAX:	213.763.5992
ALO's E-Mail:	barajall@lattc.edu

ENROLLMENT INFORMATION

Please indicate here the Total Unduplicated Headcount **(Fall 2015): 16,766**	Total Unduplicated Headcount Enrollment for Fall 2015. This includes credit and noncredit enrollments and is comprised of: • Headcount Enrollment in Full Term Classes at the end of the General Enrollment period, and • Headcount Enrollment in Short Term classes during the Fall Period.

Please retain a copy of this document for your records

List all campuses other than the home campus where 50% or more of a degree may be earned:

Campus Name:	
Street Address:	
City:	
State/Zip:	
Telephone:	
Website:	

Campus Name:	
Street Address:	
City:	
State/Zip:	
Telephone:	
Website:	

Campus Name:	
Street Address:	
City:	
State/Zip:	
Telephone:	
Website:	

Campus Name:	
Street Address:	
City:	
State/Zip:	
Telephone:	
Website:	

Signed by President: Click here to enter text.

Date: 3/11/2016

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