



5. Email Address [kosterk@bhc.edu](mailto:kosterk@bhc.edu)
- c. Campus social events N/A
1. Contact Name **Dr. Kim Armstrong**
  2. Department **Student Services**
  3. Address **6600 34<sup>th</sup> Ave., Moline, IL 61265**
  4. Telephone Number **309-796-5006**
  5. Email Address [Armstrongk@bhc.edu](mailto:Armstrongk@bhc.edu)
- d. Career services N/A
1. Contact Name **Marceia Duhm**
  2. Department **Career Services Center**
  3. Address **6600 34<sup>th</sup> Ave., Moline, IL 61265**
  4. Telephone Number **309-796-5191**
  5. Email Address [duhmm@bhc.edu](mailto:duhmm@bhc.edu)
1. Counseling
  2. Contact Name **Wendy Bock**
  3. Department **Academic Advising**
  4. Address **6600 34<sup>th</sup> Ave., Moline, IL 61265**
  5. Telephone Number **309-796-5198**
  6. Email Address [bockw@bhc.edu](mailto:bockw@bhc.edu)
- a. **Anxiety/stress management** 3
  - b. **Depression**
  - c. Physical disability
  - d. Post-traumatic stress disorder
  - e. **Social adjustment**
  - f. Support Group
- e. Other (please specify)
- a. Contact Name
  - b. Department
  - c. Address Telephone Number
  - d. Email Address
- f. Employment assistance N/A
1. Contact Name **Marceia Duhm**
  2. Department **Career Services Center**
  3. Address **6600 34<sup>th</sup> Ave., Moline, IL 61265**
  4. Telephone Number **309-796-5191**
  5. Email Address [duhmm@bhc.edu](mailto:duhmm@bhc.edu)
- g. Financial aid assistance counseling (excluding Montgomery GI Bill, IVG, ING, or Post 9/11 Bill) **2,000**
1. Contact Name **Scott Ahlgren**
  2. Department **Financial Aid Office**
  3. Address **6600 34<sup>th</sup> Ave., Moline, IL 61265**
  4. Telephone Number **309-796-5441**

5. Email Address [Ahlgrens@bhc.edu](mailto:Ahlgrens@bhc.edu)

**h.** Health services N/A

1. Contact Name
2. Department
3. Address
4. Telephone Number
5. Email Address

**i.** Mentoring N/A

1. Contact Name
2. Department
3. Address
4. Telephone Number
5. Email Address

**j.** Orientation N/A

1. Contact Name **TBA**
2. Department **Academic Advising**
3. Address **6600 34<sup>th</sup> Ave., Moline, IL 61265**
4. Telephone Number **309-796-5154**
5. Email Address [Palomakim@bhc.edu](mailto:Palomakim@bhc.edu)

**k.** Tuition assistance counseling

- a.** Contact Name **Stephanie Dixon**
- b.** Department **Financial Aid Office**
- c.** Address **6600 34<sup>th</sup> Ave., Moline, IL 61265**
- d.** Telephone Number **309-796-5444**
- e.** Email Address [dixons@bhc.edu](mailto:dixons@bhc.edu)

- |  |     |
|--|-----|
| 1. Montgomery GI Bill                  | 134 |
| 2. Illinois National Guard Grant (ING) | 32  |
| 3. Illinois Veterans Grant (IVG)       | 163 |
| 4. Post 9/11                           | 17  |

**l.** Transition assistance (counseling, housing, etc.) N/A

1. Contact Name
2. Department
3. Address
4. Telephone Number
5. Email Address

**m.** Veteran student lounge or designated gathering space N/A

1. Contact Name
2. Department
3. Address
4. Telephone Number

- 5. Email Address
- n. None of the above
- o. Other (please specify)

7. Provide the estimated number of veterans, active duty, and spouses or dependents accessing the following programs and services in 5-years.

- a. Academic advising **N/A**
- b. Academic support/tutoring **N/A**
- c. Campus social events **N/A**
- d. Career services **N/A**
- e. Counseling **N/A**
  - 1. Anxiety/stress management
  - 2. Depression
  - 3. Physical Disability
  - 4. Post-traumatic stress disorder
  - 5. Social adjustment
  - 6. Support Group
  - 7. Other (please specify)
- f. Employment assistance **N/A**
- g. Financial aid assistance counseling (excluding Montgomery GI, IVG, ING, or Post 9/11) **2,000**
- h. Health services **N/A**
- i. Mentoring **N/A**
- j. Orientation **N/A**
- k. Tuition assistance counseling
  - 1. Montgomery GI Bill **1,265**
  - 2. Illinois National Guard Grant (ING) **282**
  - 3. Illinois Veterans Grant (IVG) **976**
  - 4. Post 9/11 **17**
- l. Transition assistance (counseling, housing, etc.) **N/A**
- m. Veteran student lounge or designated gathering space **N/A**
- n. None of the above
- o. Other (please specify)
  - 1. Contact Name
  - 2. Department
  - 3. Address
  - 4. Telephone Number
  - 5. Email Address

8. Provide the estimated number of veterans, active duty, and spouses or dependents accessing the following programs and services in 10-years.

- a. Academic advising **N/A**
- b. Academic support/tutoring **N/A**
- c. Campus social events **N/A**
- d. Career services **N/A**
- e. Counseling **N/A**
  - 1. Anxiety/stress management

2. Depression
  3. Physical disabilities
  4. Post-traumatic stress disorder
  5. Social adjustment
  6. Support Group
  7. Other (please specify)
  - f. Employment assistance **N/A**
  - g. Financial aid assistance counseling (excluding Montgomery GI, IVG, ING, or Post 9/11) **2,000**
  - h. Health services **N/A**
  - i. Mentoring **N/A**
  - j. Orientation **N/A**
  - k. Tuition assistance counseling
    1. Montgomery GI Bill **2,751**
    2. Illinois National Guard Grant (ING) **611**
    3. Illinois Veterans Grant (IVG) **2,168**
    4. Post 9/11 **17**
  - l. Transition assistance (counseling, housing, etc.) **N/A**
  - m. Veteran student lounge or designated gathering space **N/A**
  - n. None of the above
  - o. Other (please specify)
9. Indicate which of the following services are provided by your counseling center.
- a. Psychiatrist
  - b. Referral to off-campus support services**
  - c. Referral to support services provided by the U.S. Department of Veterans Affairs**
  - d. Other (please specify) Other Black Hawk College support programs, as appropriate**
10. Indicate which of the following communication methods are used to inform currently enrolled veterans or active duty personnel.
- a. Advisor
  - b. College catalog
  - c. Email
  - d. Mailing
  - e. Print advertisement
  - f. Web-based advertisement
  - g. All of the above**
  - h. None of the above
  - i. Other (please specify)
11. Describe how your institution tracks retention and goal completion of veterans and active duty personnel. **N/A**
12. Indicate which accommodations are made for students called to active duty during the semester.
- a. Tuition and fee refund policy**
  - b. Leave of absence policy**
  - c. Online options for continuing in the same semester

13. Indicate which accommodations are made for spouses or dependents of active duty personnel called to active duty during the semester. **N/A**
- Tuition and fee refund policy
  - Leave of absence policy
  - Online options for continuing in the same semester
14. When called to active duty during the semester, would the semester count as a withdrawal?
- Yes**
  - No
15. Does your institution accept military credit?
- Yes**
  - No
16. Does your institution use the *ACE Guide to the Evaluation of Educational Experiences in the Armed Services* in making the determination for accepting credit?
- Yes**
  - No
17. Does your institution accept Defense Activity for Non-Traditional Education Support (DANTES) credits?
- Yes**
  - No
18. Is professional development training related to veterans or active duty personnel issues available to administrators and faculty?
- Yes
  - No**
19. Provide the URL where an individual may access this survey on your institution's website.  
**www.bhc.edu**