

# WILLIAM PATERSON UNIVERSITY

## 2007-08 COMMON DATA SET

### A. General Information

**A0 Respondent Information (Not for Publication)**

A0	Name:	Dr. Jane Zeff	
A0	Title:	Director	
A0	Office:	Institutional Research and Assessment	
A0	Mailing Address:	300 Pompton Road	
A0	City/State/Zip/Country:	Wayne, New Jersey 07470 USA	
A0	Phone:	(973) 720-3115	
A0	Fax:	(973) 720-3624	
A0	E-mail Address:	<a href="mailto:zeffj@wpunj.edu">zeffj@wpunj.edu</a>	
A0	Are your responses to the CDS posted for reference on your institution's Web site?	Yes	No
		X	
A0	If yes, please provide the URL of the corresponding Web page:	<a href="http://ww2.wpunj.edu/ira/COMMONDATASET/CDS_DEFAULT.htm">http://ww2.wpunj.edu/ira/COMMONDATASET/CDS_DEFAULT.htm</a>	

**A0A** We invite you to indicate if there are items on the CDS for which you cannot use the requested analytic convention, cannot provide data for the cohort requested, whose methodology is unclear, or about which you have questions or comments in general. This information will not be published but will help the publishers further refine CDS items.

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**A1 Address Information**

A1	Name of College/University:	William Paterson University	
A1	Mailing Address:	300 Pompton Road	
A1	City/State/Zip/Country:	Wayne, New Jersey 07470 USA	
A1	Street Address (if different):		
A1	City/State/Zip/Country:		
A1	Main Phone Number:	(973) 720-2000	
A1	WWW Home Page Address:	<a href="http://ww2.wpunj.edu/">http://ww2.wpunj.edu/</a>	
A1	Admissions Phone Number:	(973) 720-2125	
A1	Admissions Toll-Free Phone Number:	1-877-WPU-EXCEL	
A1	Admissions Office Mailing Address:	Admissions Hall, 300 Pompton Road	
A1	City/State/Zip/Country:	Wayne, New Jersey 07470 USA	
A1	Admissions Fax Number:	(973) 720-2910	
A1	Admissions E-mail Address:	<a href="mailto:admissions@wpunj.edu">admissions@wpunj.edu</a>	
A1	If there is a separate URL for your school's online application, please specify:	<a href="http://ww2.wpunj.edu/admissions/apply_now.cfm">http://ww2.wpunj.edu/admissions/apply_now.cfm</a>	
A1	If you have a mailing address other than the above to which applications should be sent, please provide:		

**A2 Source of institutional control (Check only one):**

A2	Public	X
A2	Private (nonprofit)	
A2	Proprietary	

**A3 Classify your undergraduate institution:**

A3	Coeducational college	X
A3	Men's college	
A3	Women's college	

**A4 Academic year calendar:**

A4	Semester	X
A4	Quarter	
A4	Trimester	
A4	4-1-4	
A4	Continuous	
A4	Differs by program (describe):	
A4	Other (describe):	

**A5 Degrees offered by your institution:**

A5	Certificate	
A5	Diploma	
A5	Associate	
A5	Transfer Associate	
A5	Terminal Associate	
A5	Bachelor's	X
A5	Postbachelor's certificate	X
A5	Master's	X
A5	Post-master's certificate	X
A5	Doctoral	
A5	First professional	
A5	First professional certificate	