

A. General Information

A0 Respondent Information (Not for Publication)

First Name:	Darin
Last Name:	Metcalfe
Title:	Computer Systems Analyst
Office:	Institutional Research
Address Line 1:	1500 University Drive
Address Line 2:	
Address Line 3:	
City:	Billings
State:	MT
Zipcode:	59101
Country:	USA
Phone:	406-247-5715
Email Address:	irdata@msubillings.edu
Are your responses to the CDS posted for reference on your institution's Website?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

If yes, please provide the URL of the corresponding Web page:
<https://www.msubillings.edu/ir/institutionalfacts/CommonDataSet.htm>

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 This information will not be published but will help the publishers further refine CDS items.

A1 Address Information

Name of College/University:	Montana State University Billings
Street Address Line 1:	1500 University Drive
Street Address Line 2:	
Street Address Line 3:	
City:	Billings
State:	MT
Zip:	59101
Country:	USA
Main Phone Number (Area Code):	406
Main Phone Number:	657
Main Phone Number (Ext):	2011
WWW Home Page Address:	https://www.msubillings.edu/
Main Institution Email:	

Admissions Office

Admissions Office Street Address (if different):	
Street Address (if different) Line 2:	
Street Address (if different) Line 3:	
City:	
State:	
Zip:	
Country:	
Admissions Phone Number (Area Code):	406
Admissions Phone Number:	657
Admissions Phone Number (Ext):	2888
Admissions Text Phone Number:	406
Admissions Text Phone Number:	412
Admissions Text Phone Number (Ext):	1349
Admissions Email Address:	admissions@msubillings.edu

If there is a separate URL for your school's online application, please specify:

<https://www.msubillings.edu/future/apply/index.htm>

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):

- Public
- Private (nonprofit)
- Proprietary

A3 Classify your undergraduate institution:

- Coeducational college
- Men's college
- Women's college

A4 Academic year calendar:

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

- Other (describe):

A5 Degrees offered by your institution:

- Certificate
- Diploma
- Associate
- Transfer Associate
- Terminal Associate
- Bachelor's
- Postbachelor's certificate
- Master's
- Post-master's certificate
- Doctoral degree research/scholarship
- Doctoral degree – professional practice
- Doctoral degree -- other

A6 Campus Belonging Webpage

If your institution has an office or department dedicated to fostering a welcoming and supportive campus climate for individuals from all backgrounds, please provide the URL of the corresponding Web page: