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2018 Campus Safety and Security Survey

Institution Information

Institution: Main Campus (155177001) User ID: C1551771

Registration

Required fields are indicated with asterisks (*).

Hesston College (Main Campus) (155177001)		
First Name*	Juli	
Last Name*	Winter	
Title*	Dean of Students	
Address 1*	301 S. Main Street	
Address 2		
City*	Hesston	
State*	Kansas	
Zip*	67062 -	
Phone*	620 - 327 - 8236	
Extension		
Fax	620 - 327 - 8225	
E-mail Address*	juli.winter@hesston.edu	
Confirm E-mail Address*		
Comment	* Please use this box if you would like to provide additional contact information such as a cell phone number or the best time to reach you if there are questions about your survey. Also, if the person listed above is not the person who enters the data, please provide the name and contact information for the person who enters the data. This information is for the survey help desk staff only. It will not be seen by the public.	

10/25/2018 Print Forms (Data)

Institution: Main Campus (155177001) User ID: C1551771

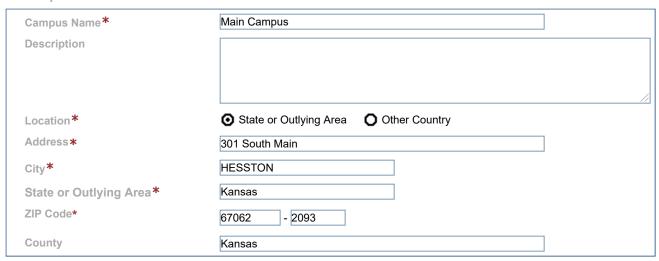
Identification

Please enter/review all applicable information. Required fields are indicated with asterisks (*).

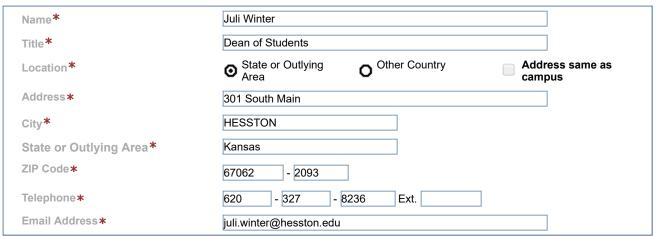
Institution Information

Institution Name	Hesston College
Address	301 South Main Hesston, KS 67062-2093
Web Address	http://www.hesston.edu
Chief Administrative Officer's Name*	Joseph Manickam
Chief Administrative Officer's Title*	President
Chief Administrative Officer's E-mail Address*	joseph.manickam@hesston.edu
Telephone*	620 - 327 - 8233 Ext.

Campus Information



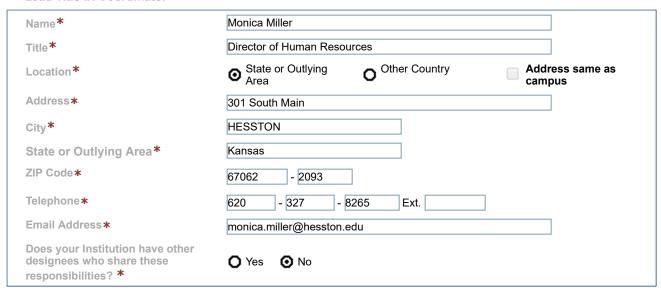
Campus Safety Officer



Campus Fire Safety Officer

Name*	Juli Winter
Title*	Dean of Students
Location*	O State or Outlying Other Country Address same as campus
Address*	301 South Main
City*	HESSTON
State or Outlying Area*	Kansas
ZIP Code*	67062 - 2093
Telephone*	620 - 327 - 8236 Ext.
E-mail Address*	juli.winter@hesston.edu

Lead Title IX Coordinator



Update Status



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