

Printable Read-Only Institution Forms

Registration

First Name

Last Name

Title

Address 1

Address 2 (Optional)

City

State

ZIP Code

Phone

Extension (Optional)

Fax (Optional)

6203278225

E-mail Address

deb.roth@hesston.edu

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.*

cell number is 620-217-7421

Institution Information

General Information

Institution Name : Hesston College

Address 1

301 South Main

City

Hesston

State

Select State

ZIP Code

670622093

Web Address *(Optional)*

www.hesston.edu/

Chief Administrative Officer information

Name

Joseph Manickam

Title

President

E-mail Address

joseph.manickam@hesston.edu

Phone

(620) 327-4221

Extension *(Optional)*

Campus Information

Campus Name

Location

State or Outlying Area Other Country

Address

City State or Outlying Area ZIP Code County (Optional)

Description (Optional)

Campus Safety Officer

General Information

Name	Title	
<input type="text" value="Deb Roth"/>	<input type="text" value="Vice President of Student Life"/>	
E-mail Address	Phone	Extension (Optional)
<input type="text" value="deb.roth@hesston.edu"/>	<input type="text" value="(620) 327-8236"/>	<input type="text"/>

Address

Location

State or Outlying Area Other Country

Address

City	State or Outlying Area	ZIP Code
<input type="text" value="HESSTON"/>	<input type="text" value="Kansas"/>	<input type="text" value="67062-2093"/>

Campus Fire Safety Officer

General Information

Name	Title	
<input type="text" value="Deb Roth"/>	<input type="text" value="Vice President of Student Life"/>	
E-mail Address	Phone	Extension (Optional)
<input type="text" value="deb.roth@hesston.edu"/>	<input type="text" value="(620) 327-8236"/>	<input type="text"/>

Address

Location

State or Outlying Area Other Country

Address

<input type="text" value="301 South Main"/>		
City	State or Outlying Area	ZIP Code
<input type="text" value="HESSTON"/>	<input style="border-bottom: 1px solid black;" type="text" value="Kansas"/>	<input type="text" value="67062-2093"/>

Lead Title IX Coordinator

General Information

Name	Title	
<input type="text" value="Whitney Douglas"/>	<input type="text" value="Title IX and Disability Services Coordinator"/>	
E-mail Address	Phone	Extension (Optional)
<input type="text" value="whitney.douglas@hesston.edu"/>	<input type="text" value="(620) 327-8342"/>	<input type="text"/>

Address

Location

State or Outlying Area Other Country

Address

City	State or Outlying Area	ZIP Code
<input type="text" value="HESSTON"/>	<input type="text" value="Kansas"/>	<input type="text" value="67062-2093"/>

Does your Institution have other designees who share these responsibilities?

Yes No

Update Status

Date Completed: 8/17/2022

Updated