

## A. General Information

**A0 Respondent Information (Not for Publication)**

First Name:	Susan
Last Name:	Canon
Title:	Director
Office:	Institutional Effectiveness and Assessment
Address Line 1:	1520 St. Olaf Ave
Address Line 2:	
Address Line 3:	
City:	Northfield
State:	Minnesota
Zipcode:	55057
Country:	United States
Phone:	507-786-3647
Email Address:	canon@stolaf.edu

Are your responses to the CDS posted for reference on your institution's Website?

☒ Y Yes or No

If yes, please provide the URL of the corresponding Web page:

<https://wp.stolaf.edu/iea/common-data-set/>

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 This information will not be published but will help the publishers further refine CDS items.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

Name of College/University:	St. Olaf College
Street Address Line 1:	1520 St. Olaf Ave
Street Address Line 2:	
Street Address Line 3:	
City:	Northfield
State:	Minnesota
Zip:	55057
Country:	United States
Main Phone Number (Area Code):	507
Main Phone Number:	(507)-786-2222
Main Phone Number (Ext):	
WWW Home Page Address:	<a href="https://wp.stolaf.edu/">https://wp.stolaf.edu/</a>
Main Institution Email:	

**Admissions Office**

Admissions Office Street Address (if different):	
Street Address (if different) Line 2:	
Street Address (if different) Line 3:	
City:	Northfield
State:	Minnesota
Zip:	55057
Country:	United States
Admissions Phone Number (Area Code):	-507
Admissions Phone Number:	(507)-786-3025
Admissions Phone Number (Ext):	
Admissions Toll-Free Phone Number (Out-of-State Area Code):	-800
Admissions Toll-Free Phone Number:	(800)-800-3025
Admissions Toll-Free Phone Number (Ext):	
Admissions Email Address:	admissions@stolaf.edu

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

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:

<https://wp.stolaf.edu/equity-inclusion/>