

SECURITIES AND EXCHANGE COMMISSION

FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2001-08-03** | Period of Report: **2001-07-01**
SEC Accession No. **0000912057-01-526417**

([HTML Version](#) on [secdatabase.com](#))

SUBJECT COMPANY

ITT EDUCATIONAL SERVICES INC

CIK: **922475** | IRS No.: **362061311** | State of Incorporation: **DE** | Fiscal Year End: **1231**
Type: **4** | Act: **34** | File No.: **001-13144** | Film No.: **01696682**
SIC: **8200** Educational services

Mailing Address

5975 CASTLE CREEK PKWY N
DR
P O BOX 50466
INDIANAPOLIS IN 46250-0466

Business Address

5975 CASTLE CREEK PKWY N
DR
PO BOX 50466
INDIANAPOLIS IN 46250
3175949499

REPORTING OWNER

WEBER VIN

CIK: **1022726**
Type: **4**

Mailing Address

CLARK & WEINSTOCK INC
1775 I ST NW 7TH FL
WASHINGTON DC 20006

Business Address

CLARK & WEINSTOCK INC
1775 I ST NW 7TH
WASHINGTON DC 20006
2022614000

STATEMENT OF
CHANGES IN BENEFICIAL OWNERSHIP

<Table>

<S><C>

1. Name and Address of Reporting Person*

(Last)	WEBER
(First)	VIN
(Middle)	
(Street)	1775 I Street, Nothwest, 7th Floor
(City)	Washington
(State)	DC
(Zip)	20006

2. Issuer Name and Ticker or Trading Symbol

(Issuer Name)	ITT Educational Services, Inc.
(Ticker or Trading Symbol)	ESI

3. I.R.S. or Social Security Number of Reporting Person (Voluntary)

(I.D. Number)

4. Statement for Month/Year

(Month)	July
(Year)	2001

5. If Amendment, Date of Original (Month/Day/Year)

(Month)	
(Day)	
(Year)	

6. Relationship of Reporting Person(s) to Issuer (Check all applicable)

<input checked="" type="checkbox"/>	
/X/	(Director)
/ /	(Officer, Include title)
/ /	(10% Owner)
/ /	(Other, specify)

7. Individual or Joint/Group Filing (Check Applicable Line)

<input checked="" type="checkbox"/>	
/X/	Form filed by One Reporting Person
/ /	Form filed by More than One Reporting Person

</Table>

TABLE I - NON-DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFICIALLY OWNED

<Table>

<S> <C> <C> <C> <C> <C> <C>

1. Title of Security (Instr.3)	2. Transaction Date (Month/ Day/Year)	3. Transaction Code (Instr.8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3,4, and 5)			5. Amount of Securities Beneficially Owned at End of Month (Instr. 3 & 4)	6. Owner- ship Form: Direct (D) or Indirect (I) (Instr.4)	7. Nature of Indirect Beneficial Ownership (Instr.4)
		Code	V	Amount	(A) (D)	or			
Common Stock	7/1/01	A	V	200	A	\$45.00	3,953 shares	D	
				shares (1)					

</Table>

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, SEE Instructions 4(b)(v).

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FORM 4 (CONTINUED)

TABLE II - DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF OR BENEFICIALLY OWNED
(E.G., PUTS, CALLS, WARRANTS, OPTIONS, CONVERTIBLE SECURITIES)

<Table>

<S> 1. Title of Derivative Security (Instr.3)	<C> 2. Conversion or Exercise Price of Derivative Security	<C> 3. Transaction Date (Month/Day/Year)	<C> 4. Transaction Code (Instr.8)	<C> 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr.3,4, and 5)	<C> 6. Date Exercisable and Expiration Date (Month/Day/Year)			
			Code	V	(A)	(D)	Date Exercisable	Expiration Date

</Table>

TABLE II CONTINUED - DERIVATIVE SECURITIES ACQUIRED,
DISPOSED OF OR BENEFICIALLY OWNED
(E.G., PUTS, CALLS, WARRANTS, OPTIONS, CONVERTIBLE SECURITIES)

7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned at End of Month (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Title	Amount or Number of Shares			

</Table>
Explanation of Responses:

(1) Shares of common stock not yet issued but credited to the reporting person's deferred share account under the ESI Non-Employee Director Deferred Compensation Plan. The shares of common stock will be paid to the reporting person upon the termination of the reporting person's service as an outside director for any reason, including retirement or death.

<Table> <S>	<C> /s/ Vin Weber	<C> 8/1/01
**Intentional misstatements or omissions of facts constitute Federal Criminal Violations. SEE 18 U.S.C. 1001 and 15 U.S.C. 78ff(a.).	----- **Signature of Reporting Person	----- Date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, SEE Instructions 6 for procedure.

Potential persons who are to respond to the collection of information Contained in this form are not required to respond unless the form displays a currently valid OMB Number.

To view the actual filing form and general Instructions go to: www.sec.gov/smbus/forms/form4.htm
