

FLORIDA DEPARTMENT OF EDUCATION  
 DOE INFORMATION DATA BASE REQUIREMENTS  
 VOLUME I: AUTOMATED STUDENT INFORMATION SYSTEM  
 AUTOMATED STUDENT DATA ELEMENTS

<b>Implementation Date:</b> Fiscal Year 1991-92 July 1, 1991
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<b>Element Name:</b> Teenage Parent Program - Dropout Prevention Ancillary Services		<b>**DELETED**</b>												
<b>Definition/Domain</b>														
<p>A set of codes which indicate the district provided or district coordinated ancillary services used by the student in a Teenage Parent program. Codes consist of the character fields which may occur a maximum of four times. Allowable codes are:</p> <table style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: left;"><u>CODE</u></th> <th style="text-align: left;"><u>DEFINITION</u></th> </tr> </thead> <tbody> <tr> <td><b>C</b></td> <td>Child Care</td> </tr> <tr> <td><b>T</b></td> <td>Transportation</td> </tr> <tr> <td><b>H</b></td> <td>Health Services</td> </tr> <tr> <td><b>S</b></td> <td>Social Services</td> </tr> <tr> <td><b>Z</b></td> <td>Not applicable</td> </tr> </tbody> </table> <p style="text-align: center; margin-top: 20px;"><b>Deleted for 9899</b></p>			<u>CODE</u>	<u>DEFINITION</u>	<b>C</b>	Child Care	<b>T</b>	Transportation	<b>H</b>	Health Services	<b>S</b>	Social Services	<b>Z</b>	Not applicable
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<b>Length:</b> 4	<b>Grades and Programs Requiring This Data Element:</b>													
<b>Format:</b> Alphanumeric	Dropout Prevention Programs Grades PK-12													
<b>Compatibility Requirement:</b> Compatible														
<b>Use Types:</b>	<b>State Reporting Formats Requiring This Data Element:</b>													
<input checked="" type="checkbox"/> State Report <input type="checkbox"/> Postsecondary Transcript <input checked="" type="checkbox"/> Local Accountability <input type="checkbox"/> District Records Transfer <input type="checkbox"/> Permanent Record	Dropout Prevention Program Evaluation DB9 11x													
<b>Data Element Number:</b> 176155	<b>Reported in Survey Periods:</b> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input type="checkbox"/> 9													
<b>Revised:</b> 8/91	<b>Volume I</b>	<b>Effective:</b> 7/98 <b>Page Number:</b> 154-5												