

**FLORIDA DEPARTMENT OF EDUCATION**  
**DOE INFORMATION DATA BASE REQUIREMENTS**  
**VOLUME II: AUTOMATED STAFF INFORMATION SYSTEM**  
**AUTOMATED STAFF DATA ELEMENTS**

<b>Implementation Date:</b> Fiscal Year 1989-90 July 1, 1989
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**Element Name:** Inservice Education, Component End Date ➔ **\*\*DELETED\*\***

**Definition/Domain**

The ending date for each inservice component being reported.

Example: (MMDDYYYY) 08161989 = The component was completed on August 16, 1989.

**Deleted for 2002-03**

<b>Length:</b> 8	<b>State Reporting Formats Requiring This Data Element:</b>  Inservice Education DB9 36x		
<b>Format:</b> Numeric			
<b>Compatibility Requirement:</b> Compatible			
<b>Use Types:</b> <input checked="" type="checkbox"/> State Report <input checked="" type="checkbox"/> Local Accountability			
<b>Data Element Number:</b> 208030			
<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			
<b>Revised:</b> 10/01	<b>Volume II</b>	<b>Effective:</b> 7/02	<b>Page Number:</b> 34-1