

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

Implementation Date: Fiscal Year 1994-95 July 1, 1994
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Element Name: Federal/State Project - Support Services																													
Definition/Domain																													
<p>This data element is used to record the type(s) of Title 1 or Title 1 Migrant funded support services provided to any Title 1 Basic, Title 1 Migrant or State Migrant participants. Codes consist of one-character fields which may occur a maximum of four times. Allowable support services codes are as follows:</p> <table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left;"><u>CODE</u></th> <th style="text-align: left;"><u>DEFINITION</u></th> <th style="text-align: left;"><u>CODE</u></th> <th style="text-align: left;"><u>DEFINITION</u></th> </tr> </thead> <tbody> <tr> <td>A</td> <td>Attendance, Guidance, Psychological Services</td> <td>S</td> <td>Social Work</td> </tr> <tr> <td>D</td> <td>Dental Services</td> <td>T</td> <td>Transportation</td> </tr> <tr> <td>H</td> <td>Health Services</td> <td>X</td> <td>Needs Assessment</td> </tr> <tr> <td>N</td> <td>Nutrition</td> <td>Z</td> <td>Not Applicable</td> </tr> <tr> <td>O</td> <td>Outreach, Advocacy</td> <td></td> <td></td> </tr> <tr> <td>R</td> <td>At-risk</td> <td></td> <td></td> </tr> </tbody> </table> <p>Examples:</p> <p>AHZZ Student received support services in Guidance and Health</p> <p>ZZZZ Not applicable. (Student did not receive support services.)</p>		<u>CODE</u>	<u>DEFINITION</u>	<u>CODE</u>	<u>DEFINITION</u>	A	Attendance, Guidance, Psychological Services	S	Social Work	D	Dental Services	T	Transportation	H	Health Services	X	Needs Assessment	N	Nutrition	Z	Not Applicable	O	Outreach, Advocacy			R	At-risk		
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Length: 4	Grades and Programs Requiring This Data Element:																												
Format: Alphanumeric	All Programs Grades PK-12																												
Compatibility Requirement: Compatible																													
Use Types:	State Reporting Formats Requiring This Data Element:																												
<input checked="" type="checkbox"/> State Report <input checked="" type="checkbox"/> Local Accountability <input type="checkbox"/> F.A.S.T.E.R.	Federal/State Compensatory Project Evaluation DB9 18x																												
Data Element Number: 122160																													
Reported in Survey Periods: <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																													
Revised: 10/01	Volume I Effective: 7/03 Page Number: 84-9																												