

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

**Implementation Date:**  
Fiscal Year 2002-03  
July 1, 2002

<b>Element Name:</b> Other Institutionalized Adult							
<b>Definition/Domain</b>							
<p>A one-character code to reflect the status of the adult education participant upon entrance into the program.</p> <table border="0"> <thead> <tr> <th align="left"><u>CODE</u></th> <th align="left"><u>DEFINITION</u></th> </tr> </thead> <tbody> <tr> <td>A</td> <td>An adult who is a patient or resident of a medical or special institution, but not in correctional facilities or classified as a "homeless adult."</td> </tr> <tr> <td>Z</td> <td>Not Applicable</td> </tr> </tbody> </table>		<u>CODE</u>	<u>DEFINITION</u>	A	An adult who is a patient or resident of a medical or special institution, but not in correctional facilities or classified as a "homeless adult."	Z	Not Applicable
<u>CODE</u>	<u>DEFINITION</u>						
A	An adult who is a patient or resident of a medical or special institution, but not in correctional facilities or classified as a "homeless adult."						
Z	Not Applicable						
<b>Length:</b> 1	<b>Grades and Programs Requiring This Data Element:</b>						
<b>Format:</b> Alphanumeric	Workforce Development Education (adult general education)						
<b>Compatibility Requirement:</b> Compatible							
<b>Use Types:</b> <input checked="" type="checkbox"/> State Report <input checked="" type="checkbox"/> Local Accountability <input type="checkbox"/> F.A.S.T.E.R. <input type="checkbox"/> Migrant Tracking	<b>State Reporting Formats Requiring This Data Element:</b> WDIS Student Demographic Information DB9 46x						
<b>Data Element Number:</b> 157425	<b>Reported in Survey Periods:</b> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 7 <input type="checkbox"/> 9 <input checked="" type="checkbox"/> F <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S <input type="checkbox"/> G <input type="checkbox"/> X						
<b>Revised:</b>	<b>Volume I      Effective: 7/08      Page Number: 208-1</b>						