FLORIDA DEPARTMENT OF EDUCATION

DOE INFORMATION DATA BASE REQUIREMENTS
VOLUME II: AUTOMATED STUDENT INFORMATION SYSTEM
AUTOMATED STAFF DATA ELEMENTS

| Element Name: Address, Mailing | |
|--|--|
| Definition/Domain | |
| The employee's mailing address: | |
| (25 characters) | Street number and name, P.O. Box, or route and box number |
| (10 characters) | Apartment number, building number, etc. |
| (20 characters) | City and state. Positions 19-20 must be a two-character state code. (See attached table of state codes in Appendix H.) |
| (9 characters) | Five-digit zip code left justified. |
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| | |
| Length: 64 | State Reporting Formats Requiring This Data Element: |
| Format: Alphanumeric | None |
| Compatibility Requirement: Compatible | |
| · | - |
| Use Types: ☐ State Report | |
| ■ State Report I Local Accountability | |
| Data Element Number: | - |
| 200640 | Reported in Survey Periods: |
| Revised: 7/98 | Volume II Effective: 7/98 Page Number: 2-1 |