

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

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| Implementation Date: Fiscal Year 1995-96 July 1, 1995 |
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| Element Name: Incident, Weapon-Related | | | | | | | | |
|--|--|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|----------------------------|
| Definition/Domain | | | | | | | | |
| <p>A code indicating whether or not the incident was weapon related.</p> <table border="0"> <thead> <tr> <th align="center"><u>CODE</u></th> <th align="center"><u>DEFINITION</u></th> </tr> </thead> <tbody> <tr> <td align="center">Y</td> <td align="center">Yes</td> </tr> <tr> <td align="center">N</td> <td align="center">No</td> </tr> </tbody> </table> | | <u>CODE</u> | <u>DEFINITION</u> | Y | Yes | N | No | |
| <u>CODE</u> | <u>DEFINITION</u> | | | | | | | |
| Y | Yes | | | | | | | |
| N | No | | | | | | | |
| <p>NOTE: An incident is weapon related if any of those involved in the incident possessed or used a weapon during the incident or if the incident was somehow related to possession, use or sale of weapons. Please code the type of weapon used under Weapon, Description.</p> | | | | | | | | |
| Length: 1 | Grades and Programs Requiring This Data Element: | | | | | | | |
| Format: Alphabetic | All Programs Grades PK-12 | | | | | | | |
| Compatibility Requirement: Compatible | | | | | | | | |
| Use Types: <input checked="" type="checkbox"/> State Report <input checked="" type="checkbox"/> Local Accountability <input type="checkbox"/> F.A.S.T.E.R. | State Reporting Formats Requiring This Data Element: School Environmental Safety Incident Report DB9 42x | | | | | | | |
| Data Element Number: 140425 | <table border="0"> <tr> <td>Reported in Survey Periods:</td> <td><input type="checkbox"/> 1</td> <td><input checked="" type="checkbox"/> 2</td> <td><input checked="" type="checkbox"/> 3</td> <td><input checked="" type="checkbox"/> 4</td> <td><input checked="" type="checkbox"/> 5</td> <td><input type="checkbox"/> 9</td> </tr> </table> | Reported in Survey Periods: | <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | <input checked="" type="checkbox"/> 3 | <input checked="" type="checkbox"/> 4 | <input checked="" type="checkbox"/> 5 | <input type="checkbox"/> 9 |
| Reported in Survey Periods: | <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | <input checked="" type="checkbox"/> 3 | <input checked="" type="checkbox"/> 4 | <input checked="" type="checkbox"/> 5 | <input type="checkbox"/> 9 | | |
| Revised: 5/03 | Volume I Effective: 7/03 Page Number: 106-165 | | | | | | | |