

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

**Implementation Date:**  
Fiscal Year 2003-04  
July 1, 2003

<b>Element Name:</b> School Number, Where Discipline/Referral Action Occurred							
<b>Definition/Domain</b>							
<p>The state assigned four-digit number for the school in which the student was disciplined one or more times during the school year. The school number will be associated with the corresponding Disciplinary/Referral Action Code.</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"><b>0001-9899</b></td> <td>District school sites assigned a unique number in the state Master School ID file.</td> </tr> <tr> <td align="center"><b>9001</b></td> <td>Any location that involves a county or district-sponsored event (e.g., County Youth Fair, District Football Championship)</td> </tr> </tbody> </table>		<u>CODE</u>	<u>DEFINITION</u>	<b>0001-9899</b>	District school sites assigned a unique number in the state Master School ID file.	<b>9001</b>	Any location that involves a county or district-sponsored event (e.g., County Youth Fair, District Football Championship)
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<b>Length:</b> 4	<b>Grades and Programs Requiring This Data Element:</b>						
<b>Format:</b> Numeric	All programs Grade PK-12						
<b>Compatibility Requirement:</b> Compatible							
<b>Use Types:</b>	<b>State Reporting Formats Requiring This Data Element:</b>						
<input checked="" type="checkbox"/> State Report <input checked="" type="checkbox"/> Local Accountability <input checked="" type="checkbox"/> F.A.S.T.E.R. <input type="checkbox"/> Migrant Tracking	Student Discipline/Referral Action DB9 19x     <div style="text-align: right;">↓</div>						
<b>Data Element Number:</b> 173075	<b>Reported in Survey Periods:</b> <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input type="checkbox"/> 7 <input type="checkbox"/> 9						
<b>Revised:</b> 7/08	<b>Volume I      Effective:</b> 7/08 <b>Page Number:</b> 244-1						