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

| Element Name:   | Federal/State Project - Support Services           |   |             |                  |
|---|--|---|-------------|------------------|
| Definition/Domain   |  |   |             |                  |
| 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. It is also used to record the type(s) of Homeless Children and Youth program funded support services provided to any student who receives services under the Stewart B. McKinney Act, P.L. 101-645. Codes consist of one-character fields which may occur a maximum of four times. Allowable support services codes are as follows: |  |   |             |                  |
| <u>CODE</u>   | <u>DEFINITIO</u>                                   | <u>N</u>  | <u>CODE</u> | DEFINITION       |
| А   | Attendance   | e, Guidance, Psychological Services                   | S           | Social Work      |
| D   | Dental Serv  | vices   | т           | Transportation   |
| н   | Health Serv  | vices   | х           | Needs Assessment |
| Ν   | Nutrition  |   | Q           | Other            |
| 0   | Advocacy, Outreach                                 |   | Z           | Not Applicable   |
| R   | At-risk  |   |             |                  |
| <ul> <li>AHZZ Student received support services in Guidance and Health</li> <li>ZZZZ Not applicable. (Student did not receive support services.)</li> </ul>   |  |   |             |                  |
| Length:   | 4 Grades and Programs Requiring This Data Element: |   |             |                  |
| Format: Alphanumeric Compatibility Requirement: Compatible  |  | All Programs Grades PK-12                             |             |                  |
| Use Types:  |  | State Reporting Formats Requiring This Data Element:  |             |                  |
| State Report  |  | Federal/State Compensatory Project Evaluation DB9 18x |             |                  |
| Postsecondary Transcript  |  |   |             |                  |
| I Local Accountability  |  |   |             |                  |
| District Records Transfer   |  |   |             |                  |
| Permanent Record  |  | _   |             |                  |
| Data Element Number:  |  |   |             |                  |
|   | 122160   | Reported in Survey Periods:                           |             |                  |
| Revised: 4/95Volume IEffective: 7/98Page Number: 84-9   |  |   |             |                  |