

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

<b>Implementation Date:</b> Fiscal Year 1994-95 July 1, 1994
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<b>Element Name:</b> FTE Earned, Course	
<b>Definition/Domain</b>	
<p>The four-decimal numeric value for the FTE earned under the Florida Education Finance Program (FEFP) by the student in each course listed or referenced in the state <u>Course Code Directory</u>. For dually enrolled students, enter the FTE earned by the student for courses listed in the state <u>Course Code Directory</u> or, if necessary, the Statewide Course Numbering System.</p> <p>Note: For vocational dually enrolled students, report FTE earned under FEFP program number 103 (9-12 basic) <u>ONLY</u> on Student Course Schedule, Surveys 1-4, and NOT on Vocational Student Course Schedule, Survey 5.</p> <p>Note: For secondary vocational students not dually enrolled, the FTE Earned, Course that is reported on Vocational Student Course Schedule Survey 5 is the FTE earned in this school year, in this course, for the term being reported on this record.</p> <p>Note: FTE earned is a calculated value based on state requirements and procedures.</p>	
<b>Length:</b> 4	<b>Grades and Programs Requiring This Data Element:</b>
<b>Format:</b> Numeric	All Programs Grades PK-12
<b>Compatibility Requirement:</b> State Standard	
<b>Use Types:</b>	<b>State Reporting Formats Requiring This Data Element:</b>
<input checked="" type="checkbox"/> State Report	Student Course Schedule DB9 14x Vocational Student Course Schedule DB9 16x
<input type="checkbox"/> Postsecondary Transcript	
<input checked="" type="checkbox"/> Local Accountability	
<input type="checkbox"/> District Records Transfer	
<input type="checkbox"/> Permanent Record	
<b>Data Element Number:</b> 122825	<b>Reported in Survey Periods:</b> <input checked="" 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
<b>Revised:</b> 7/98	<b>Volume I</b>
	<b>Effective:</b> 7/01
	<b>Page Number:</b> 97-1