

**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 1993-94 July 1, 1993
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<b>Element Name:</b> Limited English Proficient: Extension of Instruction							
<b>Definition/Domain</b>							
<p>A one-character code used to indicate that a Limited English Proficient student is receiving services beyond the base three years of eligible ESOL FTE funding as specified in Rule 6A-6.0903, FAC.</p> <table border="1"> <thead> <tr> <th><u>CODE</u></th> <th><u>DEFINITION</u></th> </tr> </thead> <tbody> <tr> <td align="center">Y</td> <td>Student in need of extension of instruction</td> </tr> <tr> <td align="center">Z</td> <td>Not applicable or no</td> </tr> </tbody> </table> <p>NOTE: The base period of three years is defined as three calendar years from the original date an LEP student enters the ESOL program. Student may receive an additional 4th, 5th, or 6th year of FEFP funded ESOL instruction and services based upon needs as determined from annual evaluations.</p>		<u>CODE</u>	<u>DEFINITION</u>	Y	Student in need of extension of instruction	Z	Not applicable or no
<u>CODE</u>	<u>DEFINITION</u>						
Y	Student in need of extension of instruction						
Z	Not applicable or no						
<b>Length:</b> 1	<b>Grades and Programs Requiring This Data Element:</b>						
<b>Format:</b> Alphanumeric	All Programs Grades K-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.	Limited English Proficient Student Information DB9 10x						
<b>Data Element Number:</b> 144125							
<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"/> 9							
<b>Revised:</b> 5/04	<b>Volume I      Effective:</b> 7/05 <b>Page Number:</b> 107-13						