

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

Implementation Date:
Fiscal Year 2009-10
July 1, 2009

Element Name: Title I Supplemental Educational Services–Length of Prescribed Program	
Definition/Domain	
<p>Indicate the total hours of the student’s prescribed enrollment for this Term within each Title I Supplemental Educational Services (SES) provider’s tutoring program as stated in the individual Student Learning Plan (SLP). The prescribed program represents the number of tutoring hours the student is assigned to complete the SES provider’s program.</p> <p>If the student has been served by multiple SES providers, report the total hours of the prescribed program for each SES provider. If a student receives SES in multiple subject areas, only the total hours of prescribed program (for all subject areas added together) must be reported. Round the hours of the prescribed program to the nearest whole number.</p> <p>Example:</p> <p>020 - The student was assigned to Sunshine Provider for a prescribed tutoring program of 20 hours.</p> <p>005 - The student was assigned to Orange Blossom Provider for a prescribed tutoring program of 5 hours.</p> <p>000 – The student does not yet have a Student Learning Plan.</p>	
Length: 3	Grades and Programs Requiring This Data Element:
Format: Numeric	Title I Supplemental Educational Services, Grades KG-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. <input type="checkbox"/> Migrant Tracking	State Reporting Formats Requiring This Data Element:
Data Element Number: 177939	Title I Supplemental Educational Services DB9 57x
	Reported in Survey Periods: <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 checked="" type="checkbox"/> 9
Revised:	Volume I Effective: 7/10 Page Number: 281-200