



INDIANA COMMISSION *for*
HIGHER EDUCATION

Form 30A Enrollment Instructions and Definitions (Fall 2023)

(InTERS) is the longitudinal data system used for the collection of Fall enrollments in your career and technical education programs. All enrollments for your school corporation will be reported to the Indiana Commission for Higher Education through your area career and technical education director. The InTERS import template may be used by your schools for their and your own use to record the student enrollments for each of your career & technical education programs. Secondary enrollments for students enrolled in career & technical education programs are to be reported as of **official count day, Monday, October 2, 2023.**

1. **STUDENT'S NAME:** Enter the last name & first name of the student. **(Required)** Columns A & B
2. **STUDENT'S TEST NUMBER (STN):** Enter the 9-digit STN number that is assigned to the student. **(Required)** Column C
3. **STUDENT'S SOCIAL SECURITY NUMBER (SSN):** Enter the student's social security number. **(Required)** Column D

If you are unable to obtain the SSN from the student, please leave blank. If no SSN is provided, the address, city, state, and zip code of the student is required
4. **DATE OF BIRTH:** Enter the month, day, and year of birth (mm/dd/yyyy). **(Required)** Column E
5. **STUDENT'S GENDER:** Enter the student gender. **(Not Required)** Column F
6. **STUDENT'S ADDRESS:** Enter the mailing address of the student. **(Required)** Column G
7. **STUDENT'S CITY:** Enter the city in which the student resides. **(Required)** Column H
8. **STUDENT'S STATE:** Enter the state in which the student resides. **(Required)** Column I
9. **STUDENT'S ZIP:** Enter the zip code in which the student resides. **(Required)** Column J
10. **HOME/CELL/EMERGENCY PHONE NUMBERS:** Enter the home phone, cell phone and/or emergency phone numbers of the student. **(Not Required)** Columns K & L & M
11. **EMAIL:** Enter the email address of the student. **(Not Required)** Column N
12. **RACE/ETHNIC:** Enter the race and ethnicity of the student. **(Not Required)** Column O
13. **GRADE LEVEL CODE:** Enter the grade level of the student. **(Required)** Column P



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14. **SESSION NAME/CODE:** Enter the session name/code. **(Required)** Columns Q & R
****The course code (only) must be unique per school year within your Area District****
15. **HOME/SENDING SCHOOL CODE:** Enter the 4-digit school code for each student received from another school that attends your career & technical education program. **(Required)** Columns S ****A Career Center can never be a home/sending school****
16. **CONDUCTING SCHOOL CODE:** Enter the 4-digit school code. This is the code number of the school where the students are taking (enrolled in) a career & technical education program. **(Required)** Column T
17. **TEACHER'S NAME:** Enter the teacher's first and last name. **(Required)** Columns U & V
****Make sure this is updated annually****
18. **SCHOOL PERSONNEL NUMBER (SPN):** Enter the instructor's teacher license number. **(Required)** Column W ****All teachers should be encouraged to apply for a SPN via DOE Licensing****
19. **TEACHER POSTSECONDARY CODE:** Enter the institution code where the teacher is employed **(Required if it pertains to the enrollment)** Column X
20. **DOE/NLPS CODE:** Enter the 4-digit DOE/NLPS code. **(Required)** Column Y
****Encourage enrollment in CEI even though no funding is associated at this time****
21. **GRADING PERIOD:** Enter the grading period for the enrollment. **(Required)** Column Z
22. **SESSION CREDITS 1st, 2nd, 3rd, 4th:** Must input the number of credits based on how grading periods are facilitated at the school. **(Required)** Columns AA & AB & AC & AD

For example, Traditional: enter # of credits for 1st semester and 2nd semester; Trimester: enter # of credits for 1st trimester, 2nd trimester, 3rd trimester; BLOCK: enter # of credits for 1st term, 2nd term, 3rd term, and 4th term
23. **FUNDING DESIGNATION:** Enter F for sessions that are funded for the full school year. Enter S for the sessions that start in the second half of the school year. Enter N for non-funded CTE enrollments for the sessions that are not funded on the 2023-2024 CTE Funding Memo. **(Required)** Column AE



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24. **ONLINE COURSE:** Enter the type of online course. **(Required if it pertains to the enrollment)**
Column AF
25. **ONLINE ENROLLMENT:** Enter the type of online enrollment. **(Required if it pertains to the student)** Column AG
26. **JOINT PROGRAM:** Enter the type of joint program as a “1” if facilitated by a postsecondary partner, “2” if facilitated by a third-party provider (INTraining) and “3” if facilitated by an employer provider. **(Required if it pertains to the enrollment)** Column AH
27. **POSTSECONDARY PARTNER:** Enter the institution code for the postsecondary partner facilitating the joint program. **(Required if it pertains to the enrollment)** Column AI
28. **THIRD-PARTY PROVIDER:** Enter the INTraining program number for the third-party provider facilitating the joint program. **(Required if it pertains to the enrollment)** Column AJ
29. **EMPLOYER PROVIDER:** Enter the name of the employer facilitating the joint program. **(Required if it pertains to the enrollment)** Column AK
30. **SPECIAL CONSIDERATIONS:** Enter the code(s) for special considerations. **(Required if it pertains to the student)** Column AL
31. **SPECIAL CONSIDERATIONS 2:** Enter the code(s) for special considerations **(Required if it pertains to the student)** Column AM
32. **DISADVANTAGED:** Enter the code(s) for disadvantaged **(Required if it pertains to the student)**
Column AN
33. **DISADVANTAGED 2:** Enter the code(s) for disadvantaged **(Required if it pertains to the student)**
Column AO
34. **SINGLE PARENT/DISPLACED HOMEMAKER:** Enter a “S” for Single Parent, “H” for Displaced Homemaker, or “B” for Both. **(Required if it pertains to the student)** Column AP

S (Single Parent): An individual who is unmarried or legally separated from a spouse and has a minor child or children for which the parent has either custody or joint custody.



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H (Displaced Homemaker): An individual who is an adult and has worked as an adult primarily without remuneration to care for the home and family, and for that reason has diminished marketable skills.

B (Both): An individual who meets both the Single Parent and Displaced Homemaker definitions.

35. **ENROLLMENT STATUS:** Enter the enrollment status of the student. **(Not Required)** Column AQ
36. **APPLIED:** Must fill in with an “A” if the course is an applied version or enter “T” if it is a traditional course. **(Required)** Column AR
37. **WITHDRAWAL DATE:** Enter the date the student withdrew from the session (mm/dd/yyyy). **(Not Required)** Column AS
38. **DUAL CREDIT TRANSCRIPTED:** Enter the number of dual credits that are earned for the course. **(Not Required)** ****Transcripted credits can be transferred to any college or university that accepts credits from the granting college or university**** Column AT
39. **DUAL CREDIT POSTSECONDARY COURSE:** Enter the name of the postsecondary course. **(Not Required)** Column AU
40. **DUAL CREDIT INSTITUTION:** Enter the institution code for the dual credit institution that is facilitating the dual credit program. **(Not Required)** Column AV
41. **EMPLOYER:** Work Based Learning field, enter the employer’s name of where the student is working? **(Required if it pertains to the enrollment)** Column BB
- **If there are multiple employers, you must select only one****
42. **EMPLOY START:** Enter the start date of the Work Based Learning employment (mm/dd/yyyy). **(Required if it pertains to the enrollment)** Column BC
43. **EMPLOY END:** Enter the end date of the Work Based Learning employment (mm/dd/yyyy). **(Required if it pertains to the enrollment)** Column BD
44. **EMPLOY TYPE:** Enter the letter(s) for the type of Work Based Learning course (Paid, Unpaid, Internship, Registered Apprenticeship, Workplace Simulation, Shadowing, Owner, Modern Youth Apprenticeship). **(Required if it pertains to the enrollment)** Column BE



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****Multiple selections can be made such as PE to denote a Work Based Learning course as paid/embedded. You do NOT need to separate with a comma****

45. **EMPLOY HOURS:** Number of hours the student worked in the Work Based Learning employment. **(Required if it pertains to the enrollment)** Column BF

****You may fill out this WBL field in the Fall, however you must update it during the Spring completion data process to ensure it aligns to the training plan associated with the Work Based Learning course****

46. **EMPLOY PATHWAY:** Must fill in the pathway that the Work Based Learning course falls into. **(Required if it pertains to the enrollment)** Column BG

****This pathway should be aligned to the actual student pathway****

47. **AREA PARTICIPATION/TRAVEL:** Enter a "1" if the student is utilizing transportation services to the course location provided by the school. **(Required if it pertains to the student)** Column BH

48. **MEDIA/PUBLIC INFORMATION STUDENT RELEASE:** You must provide the form to each student taking a CTE course and enter a "1" if it is signed and returned. This must be done each school year. **(Required)** Column BI

49. **EXTRA FLAGS:** The following options are available to use in this specific field. **(Not Required)** Column BJ

- M = Managed Student
- U = Unmanaged Student
- A = Session AM
- P = Session PM
- 5 = 50% rule teacher
- J = Adjunct teacher

New field for Fall 2023

36. **APPLIED:** Must fill in with an "A" if the course is an applied version or enter "T" if it is a traditional course. **(Required)**



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Key

Black highlighted column name=Required field

Green highlighted column name=Not Required field

Red highlighted column name=Required field if it pertains to the student/enrollment. If not, leave blank.