

Field Specifications

General Elements

Field Name: SSN	Specification Type: <input checked="" type="checkbox"/> Unique <input type="checkbox"/> Generic <input type="checkbox"/> Replica
Parent Table: Employees	Source Specification:
Label:	
Shared By:	
Alias(es): Social security number	
Description:	

Physical Elements

Data Type: Numeric	Character Support: <input type="checkbox"/> Letters (A-Z) <input type="checkbox"/> Keyboard (.,/\$#%) <input checked="" type="checkbox"/> Numbers (0-9) <input type="checkbox"/> Special (©®™Σπ)
Length: 9	
Decimal Places:	
Input Mask: ###-##-####	
Display Format:	

Logical Elements

Key Type: <input checked="" type="checkbox"/> Non <input type="checkbox"/> Primary <input type="checkbox"/> Foreign <input type="checkbox"/> Alternate	Edit Rule: <input type="checkbox"/> Enter Now, Edits Allowed <input checked="" type="checkbox"/> Enter Now, Edits Not Allowed <input type="checkbox"/> Enter Later, Edits Allowed <input type="checkbox"/> Enter Later, Edits Not Allowed <input type="checkbox"/> Not Determined At This Time
Key Structure: <input type="checkbox"/> Simple <input type="checkbox"/> Composite	
Uniqueness: <input type="checkbox"/> Non-unique <input checked="" type="checkbox"/> Unique	
Null Support: <input type="checkbox"/> Nulls Allowed <input checked="" type="checkbox"/> No Nulls	
Values Entered By: <input checked="" type="checkbox"/> User <input type="checkbox"/> System	
Required Value: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Default Value:	
Range of Values:	
Comparisons Allowed:	
<input type="checkbox"/> Same Field	<input type="checkbox"/> All <input type="checkbox"/> = <input type="checkbox"/> > <input type="checkbox"/> >= <input type="checkbox"/> ≠ <input type="checkbox"/> < <input type="checkbox"/> <=
<input type="checkbox"/> Other Fields	<input type="checkbox"/> All <input type="checkbox"/> = <input type="checkbox"/> > <input type="checkbox"/> >= <input type="checkbox"/> ≠ <input type="checkbox"/> < <input type="checkbox"/> <=
<input type="checkbox"/> Value Expression	<input type="checkbox"/> All <input type="checkbox"/> = <input type="checkbox"/> > <input type="checkbox"/> >= <input type="checkbox"/> ≠ <input type="checkbox"/> < <input type="checkbox"/> <=
Operations Allowed:	
<input type="checkbox"/> Same Field	<input type="checkbox"/> All <input type="checkbox"/> + <input type="checkbox"/> - <input type="checkbox"/> X <input type="checkbox"/> ÷ <input type="checkbox"/> Concatenation
<input type="checkbox"/> Other Fields	<input type="checkbox"/> All <input type="checkbox"/> + <input type="checkbox"/> - <input type="checkbox"/> X <input type="checkbox"/> ÷ <input type="checkbox"/> Concatenation
<input type="checkbox"/> Value Expression	<input type="checkbox"/> All <input type="checkbox"/> + <input type="checkbox"/> - <input type="checkbox"/> X <input type="checkbox"/> ÷ <input type="checkbox"/> Concatenation