

**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> <b>Exceptionality, Primary</b>	
<b>Definition/Domain</b>	
<p>A code to identify the primary exceptionality for any child, youth or adult postsecondary student enrolled in or eligible for enrollment in the public schools of a district who requires special instruction or related services to take full advantage of or respond to educational programs and opportunities because of a physical, mental, emotional, social or learning exceptionality. <u>Primary</u> indicates that exceptionality which most affects the student's ability to learn. The codes to be used follow:</p>	
<u>CODE</u>	<u>EXCEPTIONALITY</u>
<b>A</b>	Educable Mentally Handicapped
<b>B</b>	Trainable Mentally Handicapped
<b>C</b>	Orthopedically Impaired
<b>F</b>	Speech Impaired
<b>G</b>	Language Impaired
<b>H</b>	Deaf or Hard of Hearing
<b>I</b>	Visually Impaired
<b>J</b>	Emotionally Handicapped
<b>K</b>	Specific Learning Disabled
<b>L</b>	Gifted
<b>M</b>	Hospital/Homebound
<b>N</b>	Profoundly Mentally Handicapped
<b>O</b>	Dual-Sensory Impaired
<b>P</b>	Autistic
<b>Q</b>	Severely Emotionally Disturbed
<b>S</b>	Traumatic Brain Injured
<b>T</b>	Developmentally Delayed
<b>U</b>	Established Conditions
<b>V</b>	Other Health Impaired
<b>Z</b>	Not Applicable
<b>Length:</b>	1
<b>Format:</b>	Alphabetic
<b>Compatibility Requirement:</b>	State Standard
<b>Use Types:</b>	<b>State Reporting Formats Requiring This Data Element:</b>
<input checked="" type="checkbox"/> <b>State Report</b>	Exceptional Student DB9 23x
<input checked="" type="checkbox"/> <b>Local Accountability</b>	WDIS Student Demographic Information DB9 46x
<input checked="" type="checkbox"/> <b>F.A.S.T.E.R.</b>	
<b>Data Element Number:</b>	118575
	<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 checked="" type="checkbox"/> 8 <input checked="" type="checkbox"/> 9 <input checked="" type="checkbox"/> F <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S
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