

Special Education State Reporting (Georgia)

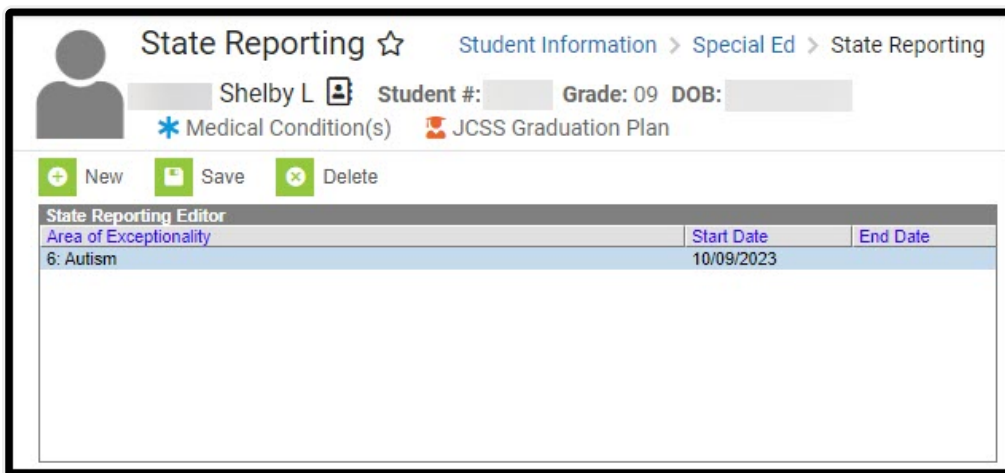
Last Modified on 04/04/2024 12:33 pm CDT

[Field Descriptions](#) | [State Reporting Detail Fields](#) | [Related Services](#) | [Special Education](#) | [SPED Events](#)

Tool Search: Student Information > Special Ed State Reporting

The Special Education State Reporting tool allows users to store and manage student Special Education state reporting data. This tool removes the legal burden of having a Special Education team meeting for an amendment to the setting for age-based changes such as an early childhood student aging out.

See the core [Special Education State Reporting](#) for information on necessary tool rights, available Ad hoc fields, and guidance on adding records.



Area of Exceptionality	Start Date	End Date
6: Autism	10/09/2023	

Special Education State Reporting Tool

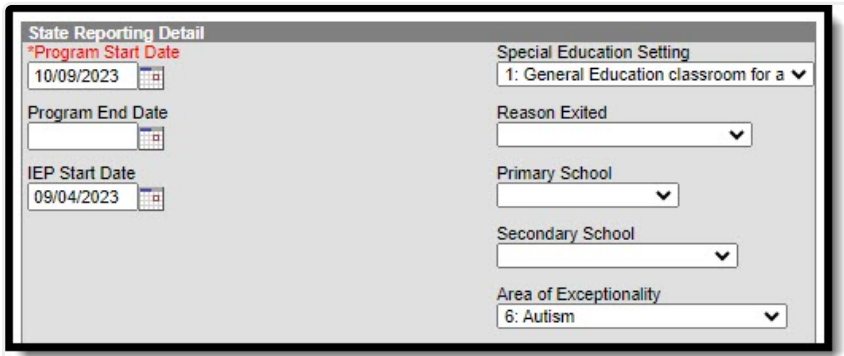
- Read** - View records.
- Write** - Edit existing records.
- Add** - Create new records.
- Delete** - Remove records.

For more information about Tool Rights and how they function, see this [Tool Rights](#) article.

Field Descriptions

The following fields are available on the SPED State Reporting Detail editor.

State Reporting Detail Fields



State Reporting Detail

***Program Start Date**
10/09/2023

Program End Date
[Empty]

IEP Start Date
09/04/2023

Special Education Setting
1: General Education classroom for a

Reason Exited
[Empty]

Primary School
[Empty]

Secondary School
[Empty]

Area of Exceptionality
6: Autism

State Reporting Detail Fields

Program Start Date

The first day of the program record.

▶ [Click here to expand...](#)

Program End Date

The last day of the program record.

▶ [Click here to expand...](#)

IEP Start Date

The first day of the student's plan.

▶ [Click here to expand...](#)

Special Education Setting

▶ [Click here to expand...](#)

Reason Exited

The reason the student stopped receiving special education services. Options include: 09: Special Ed Exit OR 10: Parent Revoked Consent.

▶ [Click here to expand...](#)

Primary School

The school where the student attends.

[▶ Click here to expand...](#)

Secondary School

The secondary school where the student attends, when applicable.

[▶ Click here to expand...](#)

Area of Exceptionality

The student's primary disability.

[▶ Click here to expand...](#)

Related Services

Related Services

Recreation Services
N: None ▼

Counseling Services
N: None ▼

Occupational Therapy Services
N: None ▼

Psychological Services
N: None ▼

School Health/Nursing Services
N: None ▼

Special Transportation Services
N: None ▼

Speech Therapy Hours
N: None ▼

Audiology Services
N: None ▼

Diagnostic Services
N: None ▼

Physical Therapy Services
N: None ▼

Interpreter Services
N: None ▼

School Social Work Services
N: None ▼

Orientation and Mobility Services
N: None ▼

Related Services Fields

Recreation Services

The number of hours the student receives recreation services.

[▶ Click here to expand...](#)

Audiology Services

The number of hours the student receives audiology services.

[▶ Click here to expand...](#)

Counseling Services

The number of hours the student receives counseling services.

▶ [Click here to expand...](#)

Diagnostic Services

The number of hours the student receives diagnostic services.

▶ [Click here to expand...](#)

Occupational Therapy Services

The number of hours the student receives occupational therapy services.

▶ [Click here to expand...](#)

Physical Therapy Services

The number of hours the student receives physical therapy services.

▶ [Click here to expand...](#)

Psychological Services

The number of hours the student receives psychological services.

▶ [Click here to expand...](#)

Interpreter Services

The number of hours the student receives interpreter services.

▶ [Click here to expand...](#)

School Health/Nursing Services

The number of hours the student receives school health/nursing services.

▶ [Click here to expand...](#)

School Social Work Services

The number of hours the student receives school social work services.

▶ [Click here to expand...](#)

Special Transportation Services

The number of hours the student receives special transportation services.

► [Click here to expand...](#)

Orientation and Mobility Services

The number of hours the student receives orientation and mobility services.

► [Click here to expand...](#)

Speech Therapy Hours

The number of hours the student spends receiving speech therapy services.

► [Click here to expand...](#)

Special Education

Special Education

Autism Hours

5: 5 hours per week

Emotional/Behavioral Disorder Hours

N: None

Orthopedic Impairment Hours

N: None

Specific Learning Disability Hours

N: None

SDD Hours

N: None

Deaf and Blind Hours

N: None

Moderate Intellectual Hours

N: None

Severe Intellectual Hours

N: None

Visual Impairment Hours

N: None

Deaf Hours

N: None

Mild Intellectual Hours

N: None

Profound Intellectual Hours

N: None

Traumatic Brain Injury Hours

N: None

Blind Hours

N: None

Hard of Hearing Hours

N: None

Other Health Impairment Hours

N: None

Speech-Language Impairment Hours

N: None

Receives All IEP

N: No

Special Education Fields

Autism Hours

The number of hours the student receives autism services.

► [Click here to expand...](#)

Deaf Hours

The number of hours the student receives deaf services.

▶ [Click here to expand...](#)

Emotional/Behavioral Disorder Hours

The number of hours the student receives emotional/behavioral disorder services.

▶ [Click here to expand...](#)

Mild Intellectual Hours

The number of hours the student receives mild intellectual services.

▶ [Click here to expand...](#)

Orthopedic Impairment Hours

The number of hours the student receives orthopedic impairment services.

▶ [Click here to expand...](#)

Profound Intellectual Hours

The number of hours the student receives profound intellectual services.

▶ [Click here to expand...](#)

Specific Learning Disability Hours

The number of hours the student receives specific learning disability services.

▶ [Click here to expand...](#)

Traumatic Brain Injury Hours

The number of hours the student receives traumatic brain injury services.

▶ [Click here to expand...](#)

SDD Hours

The number of hours the student receives SDD services.

▶ [Click here to expand...](#)

Blind Hours

The number of hours the student receives blind services.

▶ [Click here to expand...](#)

Deaf and Blind Hours

The number of hours the student receives deaf and blind services.

▶ [Click here to expand...](#)

Hard of Hearing Hours

The number of hours the student receives hard of hearing services.

▶ [Click here to expand...](#)

Moderate Intellectual Hours

The number of hours the student receives moderate intellectual services.

▶ [Click here to expand...](#)

Other Health Impairment Hours

The number of hours the student receives other health impairment services.

▶ [Click here to expand...](#)

Severe Intellectual Hours

The number of hours the student receives severe intellectual services.

▶ [Click here to expand...](#)

Speech-Language Impairment Hours

The number of hours the student receives speech-language impairment services.

▶ [Click here to expand...](#)

Visual Impairment Hours

The number of hours the student receives visual impairment services.

[▶ Click here to expand...](#)

Receives All IEP

Indicates the student receives all IEP services.

[▶ Click here to expand...](#)

SPED Events

SPED Events

Babies Can't Wait Notification (01)	<input type="text"/>	
Parent Consent to Evaluation (02)	<input type="text"/>	
Initial Evaluation (03)	<input type="text"/>	
Initial Eligibility Determination (04)	<input type="text"/>	
Initial IEP Meeting (05)	<input type="text"/>	Parent Present <input type="checkbox"/> Student Present <input type="checkbox"/>
Initiation of IEP Services (06)	<input type="text"/>	
IEP Annual Review (07)	<input type="text"/>	Parent Present <input type="checkbox"/> Student Present <input type="checkbox"/>
2nd IEP Annual Review (07)	<input type="text"/>	Parent Present <input type="checkbox"/> Student Present <input type="checkbox"/>
Re-Evaluation (08)	<input type="text"/>	
2nd Re-Eligibility Determination (08)	<input type="text"/>	
Special Education Exit (09)	<input type="text"/>	
Parent Revoked Consent (10)	<input type="text"/>	
Not Eligible for Initial Provision of Services (11)	<input type="text"/>	
Parent Refused Initial Provision of Services (12)	<input type="text"/>	
Incorrectly Reported SWD Prior Year (13)	<input type="text"/>	
Parent Consent for Provision of Services (14)	<input type="text"/>	
Re-Evaluation Waiver (15)	<input type="text"/>	

SPED Events Fields

Babies Can't Wait Notification (01)

The date of the Babies Can't Wait Notification.

[▶ Click here to expand...](#)

Parent Consent to Evaluation (02)

The date the parent consented to evaluate the student.

▶ [Click here to expand...](#)

Initial Evaluation (03)

The date of the initial evaluation.

▶ [Click here to expand...](#)

Initial Eligibility Determination (04)

The date of the Initial Eligibility Determination.

▶ [Click here to expand...](#)

Initial IEP Meeting (05)

The date of the initial IEP meeting.

▶ [Click here to expand...](#)

Parent Present

Indicates the parent was present for the initial IEP meeting.

▶ [Click here to expand...](#)

Student Present

Indicates the student was present for the initial IEP meeting.

▶ [Click here to expand...](#)

Initiation of IEP Services (06)

The date of the Initiation of IEP services.

▶ [Click here to expand...](#)

IEP Annual Review (07)

The date of the IEP annual review.

▶ [Click here to expand...](#)

Parent Present

Indicates the parent was present for the annual IEP review.

▶ [Click here to expand...](#)

Student Present

Indicates the student was present for the annual IEP review.

▶ [Click here to expand...](#)

2nd IEP Annual Review (07)

The date of the second IEP annual review.

▶ [Click here to expand...](#)

Parent Present

Indicates the parent was present for the second IEP annual review.

▶ [Click here to expand...](#)

Student Present

Indicates the student was present for the second IEP annual review.

▶ [Click here to expand...](#)

Re-Evaluation (08)

The date of the re-evaluation.

▶ [Click here to expand...](#)

2nd Re-Eligibility Determination (08)

The date of the second re-eligibility determination.

▶ [Click here to expand...](#)

Special Education Exit (09)

The date the student stopped receiving special education services.

▶ [Click here to expand...](#)

Parent Revoked Consent (10)

The date the parent revoked consent.

▶ [Click here to expand...](#)

Not Eligible for Initial Provision of Services (11)

The date the student was determined to not be eligible for initial provision of services.

▶ [Click here to expand...](#)

Parent Refused Initial Provision of Services (12)

The date the parent refused the initial provision of services.

▶ [Click here to expand...](#)

Incorrectly Reported SWD Prior Year (13)

The date of the incorrectly reported SWD prior year.

▶ [Click here to expand...](#)

Parent Consent for Provision of Services (14)

The date the parent gave consent for the provision of services.

▶ [Click here to expand...](#)

Re-Evaluation Waiver (15)

The date of the re-evaluation waiver.

▶ [Click here to expand...](#)