Item #	*December 1 Count Items*
1	Student ID Number
2	Last Name
3	First Name
4	Middle Initial
5	Birth Date
6	Gender
7	Ethnic Background
8	Grade
9	Disability Category
10	Secondary Disability Category
11	Residency
12	Home District
13	Building
14	Area Academic Office (Philadelphia SD)
15	Service Provider
16	Type of Service
17	Type of Support
18	LRE Category/ Location of Intervention
19	Related Services/ Supplementary Aids and Services
20	Teacher's Last Name
21	Transition
22	Services Plan for Students in Non-Public Schools
23	**Planned** Participation in PSSA/PASA
24	**Preschool** Program Status
25	**Preschool** Referral Source
26	Preschool Intervention Levels
27	Preschool Location of Intervention
	Revised Count Items
28	Date Exited Special Education
29	Reason for Exiting Special Education