gender spectrum

– Confidential –

Gender Support Plan

The purpose of this document is to create shared understandings about the ways in which the student's authentic gender will be accounted for and supported at school. School staff, caregivers and the student should work together to complete this document. Ideally, each will spend time completing the various sections to the best of their ability and then come together to review sections and confirm shared agreements about using the plan. Please note that there is a separate document to plan for a student formally communicating information about a change in their gender status at school.

School/District _____ Today's Date _____
Name Student Uses: _____Name on Birth Certificate:_____
Student's Gender Identity_____ Assigned Sex at Birth _____Student Grade Level _____
Date of Birth _____ Sibling(s)/Grade(s)_____ / _____ _____ /_____
Parent(s), Guardian(s), or Caregiver(s) /relation to student
_____ /_____ _____ / _____
_____ / _____ _____ / _____
Meeting participants:_____
_____

PARENT/GUARDIAN INVOLVEMENT

Guardians aware of student's gender status? Yes/No Level of Support: (none) 1 2 3 4 5 6 7 8 9 10 (High)

If support level is low what considerations must be accounted for in implementing this plan? _____
_____
_____

CONFIDENTIALITY, PRIVACY AND DISCLOSURE

How public or private will information about this student's gender be (check all that apply)?

____ District staff will be aware (Superintendent, Student Support Services, District Psychologist, etc.)
Specify the adult staff members:

____ Site level leadership/administration will know (Principal, head of school, counselor, etc.)
Specify the adult staff members:

____ Teachers and/or other school staff will know
Specify the adult staff members:

____ Student will not be openly "out," but some students are aware of the student's gender
Specify the students:

____ Student is open with others (adults and peers) about gender

____ Other – describe:_____
_____

If the student has asserted a degree of privacy, what steps will be taken if that privacy is compromised, or is believed to have been compromised? _____
_____
_____

_____

How will a teacher/staff member respond to any questions about the student's gender from:

Other students? _____

_____

_____

Staff members?_____

_____

Parents/community? _____

_____

STUDENT SAFETY

Who will be the student's "go to adult" on campus?_____

If this person is not available, what should student do?_____

What, if any, will be the process for periodically checking in with the student and/or family?_____

_____

What are expectations in the event the student is feeling unsafe and how will student signal their need for help:

During class_____

On the yard_____

In the halls_____

Other_____

Other safety concerns/questions:_____

_____

_____

What should the student's parents do if they are concerned about how others are treating their child at school?

_____

NAMES, PRONOUNS AND STUDENT RECORDS

What name and gender marker are listed on the student's identity documents? _____ _____

Name/gender marker entered into the Student Information System_____

Name to be used when referring to the student_____Pronouns _____

Can the student's name/gender marker be reflected in the SIS? _____ If so, how? If not, why not?

_____

_____

If not, what adjustments can be made to protect this student's privacy (see below)?_____

_____

_____

Who will be the point person at school for ensuring these adjustments are made and communicated as needed?

_____

How will instances be handled in which the incorrect name or pronoun are used by staff members? _____

_____

By students? _____

_____

If unable to change the student's profile in the student information system, how will the student's privacy be accounted for and maintained in the following situations or contexts:

During registration_____

Completing enrollment_____

With substitute teachers_____

Standardized tests_____

School photos_____

IEPs/Other Services _____

Student cumulative file _____

After-school programs_____

Lunch lines_____

Taking attendance_____

Teacher grade book(s)_____

Official school-home communication_____

Unofficial school-home communication (PTA/other)_____

Outside district personnel or providers_____

Summons to office_____

Yearbook_____

Student ID/library cards_____

Posted lists_____

Distribution of texts or other school supplies_____

Assignment of IT accounts/email address_____

PA announcements_____

If the student's guardians are not aware and/or supportive of the student's gender status, how will school-home communications be handled?

_____

_____

What are some other ways the school needs to anticipate the student's privacy being compromised? How will these be handled?

_____

_____

USE OF FACILITIES

Student will use the following bathroom(s) on campus_____

Student will change clothes in the following place(s)_____

If student/parent have questions/concerns about facilities, who should they contact?_____

What are the expectations regarding the use of facilities for any class trips?_____

_____

What are the expectations regarding rooming for any overnight trips?_____

_____

Are there any questions or concerns about the student's access to facilities?_____

_____

_____

EXTRA CURRICULAR ACTIVITIES

In what extra-curricular programs or activities will the student be participating (sports, theater, clubs, etc)?

_____

_____

What steps will be necessary for supporting the student there?_____

_____

_____

Does the student participate in an after-school program?_____

What steps will be necessary for supporting the student there?_____

_____

_____

Questions/Notes: _____

_____

OTHER CONSIDERATIONS

Does the student have any sibling(s) at school?_____Factors to be considered regarding sibling's needs?

_____

_____

_____

Does the school have a dress code? _____ How will this be handled?_____

_____

_____

Are there lessons, units, content or other activities coming up this year to consider (growth and development, swim unit, social justice units, name projects, dance instruction, Pride events, school dances etc.)?_____

_____

_____

_____

Are there any specific social dynamics with other students, families or staff members that need to be discussed or accounted for?_____

_____

_____

_____

What training(s) will the school engage in to build capacity for working with gender-expansive students? How will the school work to create more gender inclusive conditions for all students?_____

_____

_____

_____

Does the student use school- or district-provided transportation services? If so, how will the student's gender be accounted for?_____

_____

_____

_____

Are there any other questions, concerns or issues to discuss? _____

_____

_____

_____

_____

_____

_____

_____

SUPPORT PLAN REVIEW AND REVISION

How will this plan be monitored over time?_____

_____

What will be the process should the student, family, or school wish to revisit any aspects of the plan (or seek additions to the plan)?_____

_____

What are specific follow-ups or action items emerging from this meeting and who is responsible for them?

Action Item	Who?	When?

Date/Time of next meeting or check-in_____ Location _____