



Gender Support Plan

Education Code Section 221.5 (f) *A pupil shall be permitted to participate in sex-segregated school programs and activities, including athletic teams and competitions, and use facilities consistent with his or her gender identity, irrespective of the gender listed on the pupil's records.*

Gender Support Plans (GSP) are proactive, anticipatory, dynamic, monitored, and co-constructed during an Interactive Process Meeting. A GSP demonstrates commitment to provide support and identify contingency plans. It is monitored and adjusted as necessary. Key areas addressed in the plan include the following:

1. **Confidentiality and Privacy:** School employees are bound by student confidentiality and privacy standards.
2. **Student Records:** Schools are required to maintain a mandatory permanent student record which means a record of the student's legal name and gender are kept on file. Class rosters may be altered to reflect the student's identified name and gender for privacy.



School: _____ Staff Member/Advocate: _____ Date: _____

Identified Name: _____

Name as it Appears on Pupil's Records: _____

Identified Gender: Male Female Gender non-conforming

Identified Pronouns: _____

Pronouns to be used in school environment: _____

Pronouns to be used in communication with family: _____

Preferred timing of transition plan implementation: Immediately Effective Date _____

► COMMUNICATION

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? _____

How will school/home communication be handled? _____

Does the student have any sibling(s) at school? Yes / No Factors to be considered regarding sibling's needs?

► CONFIDENTIALITY AND DISCLOSURE

Level of Privacy/Confidentiality (I agree the following individuals have a legitimate need to know both Legal Name & Identified Name):

- Principal Assistant Principal(s) Registrar School Counselor Health Office Staff

Other adults with a need to know: _____

Teacher(s) Notification (Upon request, the advocating staff member will notify selected teacher(s) of the GSP so they can apply confidentiality safeguards, equal access to educational opportunities, and intervention if bullying or harassment issues are perceived.):

- School shall not notify any of my teachers. School may notify ALL of my teachers.

School may notify the following teacher(s): _____

School may notify substitute teacher(s): _____

Method of Teacher Notification: Email In-person Other _____

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

Other students? _____

Staff members? _____

Parents/community? _____

Notification of classmates (It is a personal decision to release confidential information to classmates and/or staff.):

Identify safe friends to share news: _____

Identify potential unsafe students and/or situations: _____

Response Plan for dealing with unsafe students and/or situations: _____

Who will be the student's Support Staff Member(s)?:

Primary: _____

Secondary: _____

All instances of Harassment/Bullying shall be immediately reported to the designated site administration.

Report Harassment/Bullying to the following staff member(s): _____

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: _____

▶ USE OF FACILITIES

Bathroom Usage (The following options are available to protect the confidentiality of the student.):

- The use of single-stall bathrooms for increased privacy, where available.
- The use of nurse or staff restroom for increased privacy, where available.
- Transgender male (female/male) use a single-stall in male restroom.
- Transgender male (female/male) use a single-stall in female restroom.
- Transgender female (male/female) use a single-stall in female restroom.
- Transgender female (male/female) use a single-stall in male restroom.

Student will use the following bathroom(s) on campus: _____

Locker Room Usage (The following options for usage of boys'/girls' locker rooms are provided to protect the confidentiality of the student.):

- Student may waive requirement to "suit up" or shower for PE classes.
- Student uses private changing and bathroom areas (e.g., single changing stalls with door/curtain, single bathroom stalls, and/or private showers with door/curtain.)
- In order to protect his/her privacy and the reasonable expectation of privacy of other students, students shall be appropriately clothed when outside of private changing and bathroom areas.
- Student may request an individual changing schedule.
- Student may consider an alternative satisfaction of PE requirement.

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? _____

▶ EXTRACURRICULARS, SCHOOL ACTIVITIES AND AFTER-SCHOOL PROGRAMS

In what extracurricular 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 _____

Other Accommodations for GSP: _____

► GENDER 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: _____

Advocate: _____ Date: _____

Action Item: _____

Advocate: _____ Date: _____

Action Item: _____

Advocate: _____ Date: _____

Action Item: _____

Advocate: _____ Date: _____

Action Item: _____

Advocate: _____ Date: _____

Action Item: _____

Advocate: _____ Date: _____



Date/Time of next meeting or check-in _____ **Location** _____

Student Date Parent/Guardian Date

Site Administrator Date Other Staff Member Date