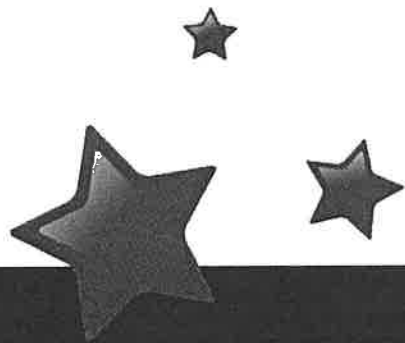




COMMUNITY UNIT SCHOOL DISTRICT 200

Individual Gender Support Plans

Middle School/ High School
Fall 2022



Inspiring in Everyone a Passion to Excel

Rationale and Purpose

- Best practice as recommended by ISBE, GLSEN, Gender Spectrum and other advocacy groups devoted to promoting affirming and inclusive environments for all
- Provides structured process to document student needs
- Ensures communication between necessary parties
- Promotes consistency across the district, particularly helpful when students move from one level to another (8th grade to 9th grade)
- Supports us as we protect the legal rights of transgender, nonbinary and gender nonconforming students



Identification

Information related to a student's gender identity, particularly for those who identify as transgender, non-binary or gender nonconforming, may come to the attention of school staff in a variety of ways. This may include, but is not limited to, the following:

- a. Self-disclosure to a trusted adult at school
- b. Self-disclosure via email to a group of school staff
- c. Disclosure by a peer
- d. Student writing related to gender identity
- e. Disclosure by a parent/ guardian



Identification

When a student is identified based on the previous ways:

1. Administrators, Teachers/ Other staff- Please notify the student's counselor or another building support staff member (i.e. Social Worker, School Psychologist).
2. Building Student Support Staff Member (School Counselor, Social Worker, School Psychologist)- Please proceed to the Initial Discussion Document section



Initial Discussion Document

1. Upon receiving notification of a student who identifies as transgender, Building Student Support Staff will meet with the student and complete the Initial Discussion Document.
2. If NO to experiencing any harassment/bullying (Question #7) and NO additional support needs (Question #9), there is no need for further follow up.

****Place completed Initial Discussion Document in the student's health file in the nurse's office.



Initial Discussion Document

3. If the student answers YES to experiencing any harassment/bullying (Question #7), but does NOT identify any additional support needs (Question #9), building procedures for harassment/bullying should be followed, including notification of a building administrator.

**** Place completed Initial Discussion Document in the student's health file in the nurse's office.

4. If the student identifies any additional support needs (Question #9), building support staff will inform the student of the next steps, which include involving the Student Services team to assist the student in developing a Student Gender Support Plan.



Gender Support Plan

1. The Student Support staff members responsible for conducting the initial discussion must meet with the appropriate members of the Student Services team (i.e. Counselor, Social Worker, Psychologist, Nurse, Dean, Administrator).

The purpose of the meeting is to develop options to meet the student's support needs, which can be discussed with the student and/or parent during the development of the Gender Support Plan.



Gender Support Plan

2. The team will identify which members will meet with the student and/or parent to develop the Gender Support Plan and arrange for a meeting.
 - a. Parent consent/participation is **STRONGLY ENCOURAGED**, but **NOT** required to develop a Gender Support Plan.
 - b. If a student does not want their parent to participate or have knowledge of the plan, discussion with the student should include barriers to parent participation as well as how staff can support the student in disclosure.
 - c. Students who do not want their parents to have knowledge of the plan should be informed that some aspects of the plan may not be possible without parental awareness (not consent).



Gender Support Plan

3. Identified members of the Student Support Team will meet with the student and/or parent and complete Student Gender Support Plan
4. Following development of the plan, Student Support Team members will identify who is responsible for following through with necessary components of the plan (i.e. contacting tech to change email address, notifying yearbook staff, etc).



Gender Support Plan

5. A copy of the completed Student Gender Support Plan should be shared with parent/guardian.
6. Completed plans are stored in the student's health file in the nurse's office. The Initial Discussion Document should be attached.
7. After completion of the plan, complete the Google Form [HERE](#).
8. Plans will be updated on a yearly basis, or sooner as requested by the student and/or parent.



Forms

Make a copy of the following documents or print them out:

1. Initial Discussion Document
2. Gender Support Plan

**Forms and procedures can be found on the [Student Services Site](#)



FAQs

Frequently Asked Questions



Questions

Time for questions...

Please ask questions that are not student specific but relevant to all...





Gender Support Procedures

The following document provides guidance to District 200 staff as it relates to the identification and support of students who identify as transgender, non-binary or gender nonconforming.

Identification

Information related to a student's gender identity, particularly for those who identify as transgender, non-binary or gender nonconforming, may come to the attention of school staff in a variety of ways. This may include, but is not limited to, the following:

- a. Self-disclosure to a trusted adult at school
- b. Self-disclosure via email to a group of school staff
- c. Disclosure by a peer
- d. Student writing related to gender identity
- e. Disclosure by a parent/ guardian

When a student is identified based on the above ways:

1. Administrators, Teachers/ Other staff- Please notify the student's counselor or another building support staff member (i.e. Social Worker, School Psychologist).
2. Building Student Support Staff Member (School Counselor, Social Worker, School Psychologist)- Please proceed to the Initial Discussion Document section.

Initial Discussion Document

1. Upon receiving notification of a student who identifies as transgender, Building Student Support Staff will meet with the student and complete the Initial Discussion Document.
2. If the student answers NO to experiencing any harassment/bullying (Question #7) and does not identify any additional support needs (Question #9), there is no need for further follow up. The student should be informed that should any of their needs change, they can reach out again to initiate further discussion. Place completed Initial Discussion Document in the student's health file in the nurse's office.
3. If the student answers YES to experiencing any harassment/bullying (Question #7), but does NOT identify any additional support needs (Question #9), building procedures for harassment/bullying should be followed, including notification of a building administrator. The student should be informed that should any of their support needs change, they can reach out again to initiate further discussion. Place completed Initial Discussion Document in the student's health file in the nurse's office.
4. If the student identifies any additional support needs (Question #9), building support staff will inform the student of the next steps, which include involving the Student Services team to assist the student in developing a Student Gender Support Plan.

Gender Support Plan

1. For any student identifying the need for additional support through the Initial Discussion Document (Question #9), the Student Support staff members responsible for conducting the initial discussion must meet with the appropriate members of the Student Services team (i.e. Counselor, Social Worker, Psychologist, Nurse, Dean, Administrator). The purpose of the meeting is to develop options to meet the student's support needs, which can be discussed with the student and/or parent during the development of the Gender Support Plan.



Gender Support Procedures

2. The team will identify which members will meet with the student and/or parent to develop the Gender Support Plan and arrange for a meeting.
 - a. Parent consent/participation is **STRONGLY ENCOURAGED**, but **NOT** required to develop a Gender Support Plan.
 - b. If a student does not want their parent to participate or have knowledge of the plan, discussion with the student should include barriers to parent participation as well as how staff can support the student in disclosure.
 - c. Students who do not want their parents to have knowledge of the plan should be informed that some aspects of the plan may not be possible without parental awareness (not consent).
 - d. For students who choose to participate in a sport with a team of their identified gender, please follow below:
 - i. Middle School Students- the building administrator will contact the Assistant Superintendent of Educational Services to discuss the next steps as the criteria will be consistent with the IHSA process.
 - ii. High School Students- please contact the athletic director as the IHSA process will be followed.
3. Identified members of the Student Support Team will meet with the student and/or parent and complete Student Gender Support Plan
4. Following development of the plan, Student Support Team members will identify who is responsible for following through with necessary components of the plan (i.e. contacting tech to change email address, notifying yearbook staff, etc).
5. A copy of the completed Student Gender Support Plan should be shared with parent/guardian.
6. Completed plans are stored in the student's health file in the nurse's office. The Initial Discussion Document should be attached.
7. After completion of the plan, complete the Google Form [HERE](#).
8. Plans will be updated on a yearly basis, or sooner as requested by the student and/or parent.

Initial Discussion Document: Supporting LGBTQ+ Students

The intent of this document is to provide school staff with guidance on collecting information from students that identify as LGBTQ+. This document is intended to allow for a conversation with a student to facilitate further support with a school-based team and caregivers. Please know that this is a sensitive topic and be sure to acknowledge the student's bravery to come forward and have this difficult conversation.

Legal Name: _____ ID: _____ Grade: _____ Date: _____

Discussion Checklist:

1. What name would you like to be called?

2. What pronouns do you prefer to use in reference to yourself? (he/him, she/her, they/them)

3. Are your guardians aware of your identity? YES NO

4. Are your guardians supportive of your identity? YES NO

Comments:

5. Who are your trusted adult(s) at school?

6. Are your trusted adult(s) aware of your identity? YES NO

7. Are you experiencing any harassment or bullying? YES NO

Comments:

8. What support do you have outside of school?

9. Is there anything that can be done at school to make your school experience better with regards to your identity?

- Staff Use of Preferred Name and Pronouns
- Bathroom
- Locker Room
- Athletic Teams
- Other: _____

Thank the student for sharing. If the student has requested additional support, the staff member will share this information with the Student Services Team to plan the next steps.



Student Gender Support Plan

Current Date: _____

Student Information

School _____ Grade Level _____ Student ID _____
 Student Preferred Name _____ Legal Name _____
 Student's Gender _____ Assigned Sex at birth _____
 DOB _____

Family Information

Parent(s)/Guardian(s)/Caregiver(s) /relation to student		Siblings/ Grades	
_____	Relationship _____	Name _____	Grade _____
_____	Relationship _____	Name _____	Grade _____
_____	Relationship _____	Name _____	Grade _____
_____	Relationship _____	Name _____	Grade _____

Meeting Participants

_____	Role/ Relationship _____	_____	Role/ Relationship _____
_____	Role/ Relationship _____	_____	Role/ Relationship _____
_____	Role/ Relationship _____	_____	Role/ Relationship _____
_____	Role/ Relationship _____	_____	Role/ Relationship _____

Parent/Guardian Involvement

Guardian(s) aware of the student's gender status? Yes/ No

If unaware and/or support level is low, what considerations must be accounted for in implementing this plan?

Confidentiality 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:



Student Gender Support Plan

Names, Pronouns, & Student Records

Name	Gender	Pronoun
_____	_____	
_____	_____	
_____	_____	

What is the name, gender with which the student most closely identifies, and pronouns to be used when referring to the student?

What name, gender, and pronouns are currently listed on the student's identity documents?

What name, gender, and pronouns are currently listed on the Student Information System (SIS)?

What accommodations are you looking for in regards to your name?

- Name change in Synergy/ legal name protected view __Yes or __No
- Name change in yearbook __Yes or __No
- Name change on ID __Yes or __No - *They will only be able to choose one name, they cannot have a separate ID with two different names or have multiple IDs issued.*
- Name change for email __Yes or __No
- Name change IEP/504 __Yes __No __NA
- Graduation Ceremony/ Promotion Ceremony (8th grade) __Yes or __No
- Other situations/ contexts of name change not listed above _____

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

Other students? _____

Staff members? _____

Parents/community? _____

What are some ways that the student will respond to questions from any of the above (i.e., "Why is David using a new name?", "Why is David using the girls bathroom now?", etc.)

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

By Students? _____

If the student's guardians are not aware and/or supportive of the student's gender status, how will school-home communications be handled, including when individual staff members need to contact guardians?

Use of Facilities (Bathroom/ Locker Room)

Student will use the following bathroom(s)/ locker room(s) in school:

Identified gender __Yes__ No __NA

_____	_____
Name of Staff assigned to notified the Principal, AP, PE/ Wellness Department Chair, Teacher	Date Completed

Nurse Bathroom __Yes__ No __NA

_____	_____
Name of Staff assigned to notified the Principal, AP, Health Staff, Teacher	Date Completed

Single Bathroom __Yes__ No __NA

_____	_____
Name of Staff assigned to notified the Principal, AP, Teacher	Date Completed

Other: __Yes__ No __NA

Explain: _____

_____	_____
Name of Staff assigned to notified the Principal, AP, School Staff	Date Completed



Student Gender Support Plan

Additional Areas

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

What are the expectations regarding rooming for any school sponsored overnight trips?

If other students/parents have questions/concerns about facilities, who should they contact?

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 (theater, clubs, etc.)?

What steps will be necessary for supporting the student in these spaces?

Does the student participate in an after-school program?

What steps will be necessary for supporting the student in these spaces?

Are there any other questions or concerns about extra-curricular activities?

*For students who choose to participate in a sport with a team of their identified gender, the IHSA process will be followed.

Student Safety

Who are your trusted adult(s) at school?

If these people aren't available, what should the student do?

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

During Class _____

In the halls _____

Unstructured times (ie. recess) _____

Other _____

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

Other safety concerns/questions _____



Student Gender Support Plan

Other Considerations

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

Are there lessons, content, traditions 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?

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

Next Steps: Support Plan Communication, Review and Revision

Based on the adjustments detailed above, who are all of the individuals that need to be informed about any changes (use of a different name, access to facilities, changes in student records, etc.)

Who will be responsible for making sure these individuals are informed?

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

Action Item	Who	When

How will this plan be monitored over time? _____

This plan will be updated on a yearly basis. If the student, family or school would like to meet sooner to review and/or revise the plan, please contact the following building staff:

Date/Time of next meeting or check-in _____