This document supports the necessary planning for a student to communicate with the school community a change in one or more aspects of their gender from its commonly assumed status to something else. Its purpose is to create the most favorable conditions for a successful experience, and to identify the specific actions that will be taken by the student, school, family, or other support providers.

### School/District

<table>
<thead>
<tr>
<th>Student’s Preferred Name</th>
<th>Legal Name</th>
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<tbody>
<tr>
<td>Student’s Gender</td>
<td>Assigned Sex at Birth</td>
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<tr>
<td>Date of Birth</td>
<td>Sibling(s)/Grade(s)</td>
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<tr>
<td>Parent(s)/Guardian(s)/Caregiver(s)</td>
<td>relation to student</td>
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What does the student wish to communicate about their gender (change in identity, expression, etc.)?

How urgent is the student’s need? Is the child currently experiencing distress regarding their gender?

### PARENT/GUARDIAN INVOLVEMENT

Are guardian(s) of this student aware and supportive of their child’s gender communication?  

| Yes | No |

If not, what considerations must be accounted for in implementing this plan?

### INITIAL PLANNING MEETING

When will the initial planning meeting take place?  

Where will it occur?

Who will be the members of the team supporting the student’s communication?

- [ ] Student
- [ ] Parent(s)
- [ ] School Staff
- [ ] Other

### COMMUNICATION DETAILS

What is the specific information that will be conveyed to other students (be specific)?

What requests will be made (new name, pronouns, use of facilities, etc.)?
With whom and when will this information be shared?

- With peers in the student’s class only  
  Date: __________
- With peers in the student’s grade level  
  Date: __________
- With some/all students at school (specify) ____________________________  
  Date: __________
- Other (specify) __________________________________________________

Who will lead the lessons/activities framing the student’s announcement? ____________________________

What will the lesson/activities be? ____________________________

Will the student be present for the lesson/sharing of info about their gender? ____________________________

If yes, what if any role does the student want to play in the process? ____________________________

Once the information is shared, what parameters/expectations will be set regarding approaching the student? ____________________________

Other notes, considerations or questions ____________________________

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KEY DECISIONS PRIOR TO STUDENT’S COMMUNICATION

**Communications with Other Families**

Will any sort of information be shared with other families about the student’s gender? ____________________________

With whom:  ____ Families in child’s grade  ____ Whole School  ____ Other (specify) ____________________________

Who will be responsible for creating this? ____________________________  
When will it be sent? ____________________________

How will it be distributed? ____________________________

What specific information will be shared*? ____________________________

Questions/Notes: ____________________________

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* see sample letters

**Training for School Staff**

Will there be specific training about this student’s gender with school staff?  ____ When? __________

Who will be conducting the training? ____________________________  
What will be the content of the training? ____________________________

Questions/Notes: ____________________________
Parent Information Night About Gender Diversity
Will there be specific training for school community members? __________ When? __________________________
Who'll conduct it? __________________________ Will it reference the student’s gender? __________
What will be the content of the training? __________________________________________________________
____________________________________________________________________________________________
Questions/Notes: ______________________________________________________________________________
____________________________________________________________________________________________

Class Meeting with Parents
Will there be any meeting with the families of the student’s peers? _____ When? __________________________
Who will lead the meeting? _______________ Who will be attending the meeting? ______________________
What will be the purpose for this meeting? __________________________________________________________
____________________________________________________________________________________________

Identifying and Enlisting Parent Allies
Are there any parents/adults in the community you would like to enlist in support of the child’s communication?
If so, who? __________________________________________________________
When will you speak with them? _______________ What will be your request? ____________________________
____________________________________________________________________________________________
Questions/Notes: ______________________________________________________________________________
____________________________________________________________________________________________

Identifying and Enlisting Peer Allies
Are there other students you would like to enlist in support of the child’s communication? ______________
If so, who? __________________________________________________________
When will they be spoken with? _______________ What requests will be made? ____________________________
____________________________________________________________________________________________
Questions/Notes: ______________________________________________________________________________
____________________________________________________________________________________________

Siblings
Does the student have any siblings at the school? __ What needs to be considered for them?
Training in their classroom(s)? _________________________________ Emotional Support? ________________
____________________________________________________________________________________________
____________________________________________________________________________________________
Questions/Notes: ______________________________________________________________________________
____________________________________________________________________________________________
TIMELINE

Which of the following will take place in relation to this student’s gender communication, and when will it occur and who will be responsible for making it happen?

<table>
<thead>
<tr>
<th>Activity</th>
<th>Date</th>
<th>Lead</th>
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<tbody>
<tr>
<td>Initial Planning Meeting</td>
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<tr>
<td>Lessons/Activities with Other Students</td>
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<td>Communications with Other Families</td>
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<td>Training for School Staff</td>
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What are the specific follow-ups or action items emerging from this meeting and who is responsible for them?

<table>
<thead>
<tr>
<th>Action Item</th>
<th>Who?</th>
<th>When?</th>
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