



Identity Support Plan

CONFIDENTIAL

The purpose of the Identity Support Plan (IDSP) is to develop a plan to support the student's identity, success, and safety at school. School staff, caregivers, and the student must work together to complete this document. This District is committed to making our schools a safe and supportive place for ALL students, regardless of gender, sexual orientation, gender identity, or expression:

- ♥ Student is the expert in their own risk and safety, and therefore, pursuant to state law, education code, and best practices, the interviewer shall defer to the student regarding the completion of the form. Only complete portions of the form with which the student is comfortable.
- ♥ Student may decide who is involved in the IDSP process. Recommended support includes the student's school counselor, school social worker or LGBTQ Liaison, and chosen support person (i.e., friend, family, advocate, guardian).
- ♥ We, school and district staff, are committed to developing a working relationship to support the student's safety (e.g., it's not about the form).
- ♥ We, school and district staff, are committed to building a safe and supportive school environment. Harassment and bullying are not acceptable, and we commit to immediately seeking appropriate guidance and support for all involved.
- ♥ We, school and district staff, are committed to advocating for a school campus that teaches staff and students how to create a safe and supportive environment for all students, including LGBTQ students.
- ♥ Most importantly, the purpose of an IDSP is to have discussions prioritizing the student's affirmed name and gender, pronouns, circle of support, safety, and resource linkages.

STUDENT INITIALS

IDSP LIAISON INITIALS

IDENTITY/GUARDIAN/FAMILY INVOLVEMENT

*Only complete the sections of the plan that the student requests and is prepared to discuss.

- 1) Student ID Number:
- 2) Student's Affirmed Name:
- 3) Student's Gender and Pronouns:
- 4) Today's date:
- 5) Preferred timing of transition plan implementation:
- 6) Participants in meeting, relationship to student:
- 7) Are your guardian(s) aware of your gender identity?
- 8) Are your guardian(s) supportive of your transition?
- 9) Do you have siblings at the school, and if so, are they aware of your gender? Are they supportive?

NAMES, PRONOUNS AND STUDENT RECORDS, DISCLOSURE

Understanding School Information Systems and Classroom Records:

School Districts use online student information systems, called SIS, to keep track of student records, including test scores, grades, and attendance. By law, your official student transcript must be in your legal name. However, you do have the right to update your gender on your permanent school record. Parent permission is not required for this process, and you are not required to provide any documentation to the school district to support this change.

At school, you may choose to have your gender (male, female, or non-binary) and preferred name updated in the student database which stores your legal name and gender in an alternative file that cannot be seen by most school staff. There are only a handful of people who have legal access to your stored information. Typically, this includes school administrators, registrars, and nurses.

Changing your name and gender in the student database would effectively update your record to reflect your authentic identity. It would change your information in attendance rolls, student ID, online learning platforms (e.g., Google Classroom, Canvas, etc.), grade books, yearbooks, **as well as in the parent section of the SIS and in official communications home to your legal guardian(s)**, such as attendance letters and report cards. It will not change your legal name in your permanent records/transcripts, however that can be done if/when you choose to legally change your name.

STUDENT INITIALS

IDSP LIAISON INITIAL

- 1) Do you wish to update the student information system (SIS) to your affirmed name and gender (legal gender options in California are male, female, and non-binary)?
- 2) While parent/guardian permission is not required for this process, are you comfortable with us discussing this with your parent/legal guardian?
- 3) If your guardian(s) are not aware and/or not supportive of your gender status, how will school-home communications be handled? (e.g., What are some ways that teachers and school staff may try to protect your identity?)
- 4) Please identify supportive friends and/or school staff who are aware and affirming of your gender:
- 5) If this SIS information update occurs during the school year, we may want to consider notifying teachers or others in your day-to-day school experience. Are you comfortable with this? Would you like to notify your teachers via emails or meetings, or would you like us to handle the notifications?

SAFETY AND SUPPORT

- 1) We want to make sure every student feels safe at school. Are there situations or people at school that make you feel unsafe or uncomfortable? (Staff, teachers, other students etc.?)
- 2) If you feel bullied, harassed, or otherwise unsafe, who are safe, on-campus adults you could tell?
- 3) Trained staff have helped facilitate class-talking circles in order to increase the understanding of others and decrease bullying. If you think circles might be helpful, would you like to be involved?
- 4) Are there locations at school that bring up safety concerns, such as bathrooms or locker rooms?
- 5) Are you comfortable with someone working with your peers, teachers, and school staff to help them better support you?
- 6) If yes, is there anything you would want to make sure is emphasized or communicated on your behalf?
- 7) Is there anything that you have worried about or felt unsafe about that we have not yet talked about?

RESTROOMS AND LOCKER ROOM FACILITIES

By law, schools are required to provide access to restrooms and locker room facilities in which a student feels most comfortable and safe. The purpose of this section is to develop a plan to ensure the student has equal access to needed facilities on campus.

- 1) What restrooms do you feel comfortable using on campus?
- 2) Is there anything that would make you feel more comfortable? For example, are specific times desired?
- 3) Where do you prefer to change clothes and/or shower for PE etc.? Would you like a tour of the facilities?

EXTRA-CURRICULAR ACTIVITIES

- 1) In what extra-curricular programs or activities will you be participating (sports, performing arts, clubs, ROTC, etc.)?
- 2) Do you participate in an after-school program?

- 3) What steps will be necessary to support you in these programs (i.e., uniforms, supplies, overnights)?

- 4) Are you comfortable with someone working with these staff (activity advisors, coaches, commanding officers, etc.) to help them better support you? Is there anything you would want to make sure is emphasized or communicated on your behalf (i.e., sharing pronouns, safety concerns, changing for PE or sports)?

WRAP-UP, REVISIONS AND SIGNATURES

- A. Is there anything that you are concerned about that we have not yet discussed? Do you have questions?

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

ACTION ITEM(S)	WHO?	WHEN?

A copy of this plan should be kept with the student/family; one copy with student's safe contact at the school. If the student, family, or school wish to revisit the plan, they can request a meeting with the student's liaison.

Student Signature and Date:

IDSP Contact/Support:

Parent/Guardian (if applicable):

School Administrator (if applicable):

This tool was developed by Kinder Future. Find us at www.KinderFuture.org.

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StigmaFreeOC

