

REPORT OF STUDENT DISCLOSURE OF IDENTIFICATION

Dear _____ *[insert parent/guardian name]*,

This letter is to inform you that your student _____ *[insert student's name listed on registration]* has made a request of a licensed employee to: *(check all that apply)*

- make an accommodation that is intended to affirm the student's identification as follows:

- use an identification (name, pronoun, gender, etc.) that is different from the identification (name, pronoun, gender, etc.) listed on the student's school registration forms. The change is: _____

If you would like to amend the student's registration paperwork to permit the student's requested accommodation and/or include the use of the above-referenced identification change, please complete the attached form and return it to the district administration office: Student Services Department, Waterloo Schools, 1516 Washington Street, Waterloo, IA 50702.

Sincerely,

Principal, *[insert school name]*

Date