

EXEMPTION REQUEST FORM -- COVID-19 VACCINATION

All employees and students (other than those attending classes fully remotely) are required to receive COVID-19 vaccination, unless they are granted a medical or religious exemption. An individual seeking exemption should complete section I: Assumption of Risk. If the waiver request is for a medical exemption, the individual must also have their medical provider complete Part II and send it directly to Betty Visconage. If the waiver request is for a religious exemption, the individual should also complete Part III.

NAME: _____ ID #: _____

SECTION I: ASSUMPTION OF RISK

COVID-19 is a highly contagious respiratory virus that affects people of all ages. This virus can cause long-term medical problems and death, regardless of age. This virus spreads through respiratory droplets and up to 50% or more of people can be infected without realizing it. Prevention strategies include wearing a mask and physically distancing when around others. However, these strategies affect what is accepted as “normal life” and are a challenge to adhere to for many and may negatively impact St. Mary’s operations.

According to the scientific data, COVID-19 vaccines are safe and highly effective at preventing severe illness, hospitalization, and death. When large numbers within a population are immunized, viral spread will be significantly limited. Each individual of a community contributes to this protective approach. Foregoing vaccination puts one at risk for getting the disease, along with the associated risk of long-term medical problems or death. Individuals who are not vaccinated against COVID-19 also may put others they interact with at greater risk.

To minimize the risk of viral spread, unvaccinated individuals may be required to undergo regular screening tests for COVID-19 (which may occur as regularly as is determined necessary, such as on a weekly basis). Unvaccinated persons may also be required to quarantine away from campus if exposed to the virus, and during such quarantine may be compelled to use paid or unpaid leave time as applicable and according to St. Mary’s policy.

I have read and reviewed the information provided above concerning the risks of foregoing the COVID-19 vaccine and the benefits of receiving the COVID-19 vaccine. For the reasons described below, I seek NOT to be vaccinated and understand the potential consequences associated with this request. I understand that if I receive an exemption, I may be required to undergo regular screening/testing for COVID-19 and to take leave to quarantine if exposed to the virus.

Signature: _____

Date: _____

Section II: Medical Exemption Request (to be completed by medical provider)

Medical Exemption: See the [CDC guidance \(https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html#Contraindications\)](https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html#Contraindications) regarding contraindications for COVID-19 vaccines.

Medical Provider Certification of Contraindication: I certify that my patient (named above) should not be vaccinated against COVID-19 because they have one of the following CDC-recognized contraindications:

Documented anaphylactic allergic reaction or other severe adverse reaction to any COVID-19 vaccine – e.g., cardiovascular changes, respiratory distress, or history of treatment with epinephrine or other emergency medical attention to control symptoms. Generally, does not include gastro-intestinal symptoms as the sole presentation of allergy. **Describe the specific reaction:**

Documented allergy to a component of the vaccine – does not include sore arm, local reaction or subsequent respiratory tract infection. **Describe the specific reaction:**

Signature of Healthcare Provider:	
Name (print):	Address/Phone or Clinic Stamp:

Section III: Religious Beliefs Exemption Request (Note, seminarians, Catholic religious, and those who are required to be Catholic as a condition of their employment may not receive a religious exemption)

Requests for exemption based on religious beliefs: if the bona fide religious beliefs of an individual prevent COVID-19 vaccination, the individual may be exempt from the vaccine requirement upon submission of a written statement below explaining the sincerely held religious belief, practice, or observance that prevents compliance with the COVID-19 vaccination requirement, provided that the exemption does not cause an undue hardship to St. Mary's (attach additional pages if needed)

Signature: _____

Date: _____