

To request an exemption from required vaccinations, please complete Section 1 below and have your medical provider complete Section 2 before returning this form to the human resources department.

Section 1

Name (print):

Date:

Dept.:

Position:

Manager:

Work/Cell Phone

I am requesting a medical exemption from [Company Name]'s mandatory vaccination policy for the following vaccination(s):

I verify that the information I am submitting to substantiate my request for exemption from [Company Name]'s vaccination policy is true and accurate to the best of my knowledge. I understand that any falsified information can lead to disciplinary action, up to and including termination.

I further understand that [Company Name] is not required to provide this exemption accommodation if doing so would pose a direct threat to myself or others in the workplace or would create an undue hardship for [Company Name].

Employee Signature:

Date: __/__/__

Section 2

Medical Certification for Vaccination Exemption

Employee Name: _____

Dear Medical Provider,

[Company Name] requires vaccination against [insert disease name, such as COVID-19, influenza, etc.) as a condition of employment. The individual named above is seeking an exemption to this policy due to medical contraindications.

Please complete this form to assist [Company Name] in the reasonable accommodation process.

The person named above should not receive the [insert disease name] vaccine due to:

This exemption should be:

Temporary, expiring on: __/__/__, or when _____.

Permanent.

I certify the above information to be true and accurate, and request exemption from the [insert disease name] vaccination for the above-named individual.

Medical Provider Name (print):

Medical Provide Signature: _____

Date: __/__/__

Practice Name & Address: _____

Provider Phone: _____

HR USE ONLY

Date of initial request: __/__/____

Date certification received: __/__/____

Accommodation request:

Approved __/__/____

Describe specific accommodation details:

Denied __/__/____

Describe why accommodation is denied:
