FACE COVERING EXEMPTION REQUEST VERIFICATION FORM

AccessAbility Services - University of Waterloo 1401 Needles Hall, 200 University Avenue West, Waterloo, ON N2L 3G1 P. 519.888. 4567 ext. 35082 F. 519.746.2401

Web: uwaterloo.ca/accessability-services

E-mail: access@uwaterloo.ca

Occupational Health – University of Waterloo
Commissary Building COM 115, 200 University Avenue West
Waterloo, ON N2L 3G1
P. 519.888.4567 ext. 40538 F. 519.888.4373
Web: https://uwaterloo.ca/occupational-health
Email: occupationalhealth@uwaterloo.ca

TO BE COMPLETED BY APPLICANT

SECTION 1: APPLICANT INFORMATION

Applicant information (please print)		
Last name:		
First name:		
Waterloo ID number: (Student or Employee ID)		
Phone number (home/cell/work ext.)		
Waterloo e-mail address:	@uwaterloo.ca	

SECTION 2: PURPOSE OF THE FACE COVERING EXEMPTION REQUEST VERIFICATION FORM

To help limit the spread of COVID-19, everyone entering campus is required to wear an appropriate face covering in common indoor spaces. This includes corridors, lobbies, washrooms, elevators, classrooms, teaching laboratories and meeting rooms, or in any area where physical distancing is a challenge.

The purpose of this form is to provide information to the University which verifies a medical need for an exemption to the face covering requirement while the applicant is on University of Waterloo property, as per the University's communication on face covering requirements on campus.

We strongly advise people who are exempt from wearing a face covering to avoid all indoor spaces/places. Those who have a valid exemption from wearing a face covering are asked to contact AccessAbility Services (for students) or Occupational Health (for employees) to develop an accommodation plan. Accommodations may include access to remote participation (academics), alternate work arrangements (employees), which will be reviewed on a case-by-case basis.

Please note: if there are any **accommodation needs** (academic or employment) beyond consideration for an exemption from wearing a face covering while on campus property, please complete a disability verification form that aligns with the applicant's underlying disability or disabling condition and associated functional limitations. Applicants should contact <u>AccessAbility Services</u> (students) or <u>Occupational Health</u> (employees) for the documentation that applies to their situation.

SECTION 3: APPLICANT INFORMED CONSENT AND AUTHORIZATION

Completion of all sections listed below is voluntary. Applicant may also withdraw consent pertaining to any of the below at any time. NOTE: Should you elect not to provide your consent, you may forfeit your access to support services you require during your admission to /employment with the University of Waterloo.



AUTHORIZATION TO MY ATTENDING HEALTH CARE PROFESSIONAL TO COMPLETE THIS FORM:

By submitting this form, I authorize the attending health care professional named in this form to complete the Face Covering Exemption Request Verification Form and disclose information concerning myself to AccessAbility Services (students) or Occupational Health (employees), University of Waterloo.

CONTACT WITH MY ATTENDING HEALTH CARE PRACTITIONER:

By signing below, I give consent for the University of Waterloo (AccessAbility Services or Occupational Health Services) to contact the service provider who completed this form to discuss information provided in this document, if necessary, to clarify information regarding functional limitations or if there are questions related to my application.

Applicant's signature:	Date completed (DD/MM/YYYY):
Applicant's informed authorization for disclosure of information is obtained in accordance with the following sections of the Freedom of Information and Protection	

Applicant's informed authorization for disclosure of information is obtained in accordance with the following sections of the Freedom of Information and Protection of Privacy Act. Sections 41.(1)(a), 41.(1)(b), and 41.(1)(c) allowing for the use of personal information and sections 42.(1)(b), -s.42(1)(c), and s.42(1)(d) allowing for the disclosure of personal information.

TO BE COMPLETED BY ATTENDING HEALTH CARE PRACTITIONER

This form should be completed by an appropriately licensed and trained professional, with knowledge of the applicant's underlying disability, and the capability to assess the applicant's ability to wear a face covering based on associated functional limitations. This may include: Family Physician, Nurse Practitioner, Psychiatrist, Psychologist, Registered Social Worker etc.

SECTION 4: PURPOSE OF THE FACE COVERING EXEMPTION REQUEST VERIFICATION FORM

The University of Waterloo requires your verification that above-named applicant (student or employee of the University of Waterloo) has a medical need to be exempt from the requirement to wear a face covering while the applicant is on University of Waterloo property. Currently, "all employees, students, visitors and contractors are required to wear a face covering in common use areas of University buildings. This includes corridors, lobbies, washrooms, elevators, classrooms, teaching laboratories and meeting rooms, or in any area where physical distancing is a challenge."

Exemptions may occur only with appropriate documentation provided to the University (AccessAbility Services for students and Occupational Health for employees).

To date, the current evidence for masking during COVID-19 outweighs any theoretical risks. As such, we fully advocate for the universal masking, in addition to maintaining 2m physical distance at all times and diligent frequent hand washing (or the use of alcohol based hand sanitizer). Inappropriate medical exemptions have the potential to inadvertently hasten the spread of COVID-19 in our community. However, there are exceptional circumstances, which do warrant consideration of face covering exemption.

We strongly advise people who are exempt from wearing a face covering to avoid all indoor spaces/places. Those who have a valid exemption from wearing a face covering are asked to contact AccessAbility Services (for students) or Occupational Health (for employees) to develop an accommodation plan. Accommodations may include access to remote participation (academics), alternate work arrangements (employees), which will be reviewed on a case-by-case basis.

SECTION 5: VERIFICATION OF DISABILITY

1.	Does the patient have a medical disability-related barrier to complying with the requirement to wear a face covering while on campus at the University of Waterloo during their academic studies or during the course of their employment? Exemptions will be considered for those that meet one (or more) criteria listed below. Note – you are		
	not required to indicate which category; only to confirm that the patient does or does not meet the criteria.		
	☐ Yes, the patient meets one of the criteria listed below		
	☐ No, the patient does not meet one of the criteria listed below		
	Individuals, especially children, with severe sensory processing disorders		
	 Individuals with facial deformities that are incompatible with masking 		
	• Children less than 2 years of age, Children less than 5 years of age (cognitively or developmentally) who refuse to wear face coverings and cannot be persuaded to		
	Individuals with PTSD who are triggered by face covering		
	 Individuals with extreme agoraphobia/asphyxia phobia (which is longstanding predating COVID-19) 		
	 Individuals with cognitive impairment, intellectual deficiency or autism spectrum disorder for who wearing a 		
	mask/ face covering will cause severe stress or disorganization		
	 Individuals unable to apply or remove face covering without assistance 		
	 Individuals with other medical condition(s) which would preclude from wearing a mask /face covering – 		
	assessor to provide additional details regarding the associated functional limitations :		
Plε	ease Note:		
	 ASTHMA is NOT a contraindication to wearing a mask/face covering 		
	• COPD (including chronic bronchitis and emphysema) is NOT a contraindication to wearing a mask/face covering		
	Discomfort caused by the face covering is not an exemption		
	Acne caused by the face covering is not an exemption		
	 Patients wearing oxygen can wear a face covering over top of the nasal cannula. It does not impair their ability to continue to wear their oxygen, nor lower their oxygen levels. 		
2.	OPTIONAL: Additional information (Please use this space to provide any other information about the applicant's disability/disabling condition and their functional limitations that the University of Waterloo should consider):		

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CERTIFICATE OF ATTENDING HEALTH CARE PRACTITIONER

Documentation completed by a relative of the applicant will not be accepted due to professional and ethical considerations even when the relative is otherwise qualified to do so. The provider signing this form must be the same person answering the questions on the form above.		
Practitioner Name (Please print):	Specialty: Family Physician Nurse / Nurse Practitioner Psychologist Psychiatrist Other:	
Practitioner Signature:	Address/Clinic Name:	
Practitioner License/Registration #:	Phone #: () -	
Affix card here or office stamp	Fax #: () - Date Completed:	
	/(DD/MM/YYYY)	