



**STATEMENT OF MEDICAL EXEMPTION
(Students)**

MANDATORY VACCINATION FOR CAMPUS

Please email completed form to vaxinfo@uwindsor.ca

SECTION 1 - REQUESTER INFORMATION				
Last Name			First Name	
UWin ID Number				
Unit Number	Street Number	Street Name		P.O. Box
City/Town	Province/State	Country	Postal Code	

The University of Windsor requires that employees, contractors, volunteers, and students at the University be vaccinated against COVID-19 unless they have a valid exemption.

1. By submitting this form, I am asking that I be exempted from vaccination requirements due to a medical condition. I certify that the information below was completed by my physician or registered nurse in the extended class, who is qualified to practice in the Province of Ontario.
2. I understand that should an outbreak occur, the Windsor-Essex County Health Unit or the University of Windsor may impose additional restrictions or requirements on me for health and safety reasons which may not apply to others on campus who have been fully vaccinated.
3. I understand that the University of Windsor may require me to follow additional health and safety protocols, including, but not limited to:
 - a. Mandatory COVID testing and disclosure of test results (see testing protocol attached as Appendix I);
 - b. Masking and/or physical distancing; and/or
 - c. Remote working/learning.
4. I understand that I may choose to be vaccinated at a later date and that the University of Windsor intends to host a COVID-19 vaccination clinic on campus.
5. I request that I be exempted from the vaccination requirements of the University of Windsor.
6. I have read this Statement of Medical Exemption in its entirety and the information I have completed is accurate and true.
7. I consent to the collection, use, disclosure and retention of my personal information as outlined below.
8. I recognize that the University reserves the right to take action with respect to any individual who breaches the COVID-19 Vaccination Policy, including any individual who submits false information to the University, or otherwise fails to comply with the University's mandatory vaccination requirements as outlined in the COVID-19 Vaccination Policy.

Signature of Requester

Date

Risks of not being vaccinated:

Remaining unvaccinated may pose a serious risk to others, particularly to certain vulnerable populations. Therefore, the University has obligations to protect the health and safety of students, staff, and faculty.

You may be more likely to be exposed to the COVID-19 virus than others if you live in a group setting or participate in group activities in closed/crowded spaces where the COVID-19 virus may transmit more easily.

COVID-19 can result in severe illness. Those who are at particular risk of developing more severe disease or outcomes from COVID-19 are people:

- who are an older adult (increasing risk with each decade, especially over 60 years)
- of any age with chronic medical conditions, including: lung disease, heart disease, high blood pressure, diabetes, kidney disease, liver disease, dementia, or stroke
- of any age who are immunocompromised, including those with an underlying medical condition, such as cancer or those taking medications which lower the immune system, such as chemotherapy
- living with obesity, such as having a body mass index (BMI) of 40 or higher

Vaccination is one of the most effective ways to protect our families, communities and ourselves against COVID-19. Evidence indicates that vaccines are effective at preventing serious outcomes, such as severe illness, hospitalization and death due to COVID-19. A growing body of evidence indicates that people fully vaccinated with an mRNA vaccine (Pfizer-BioNTech and Moderna) are less likely to have a symptomatic infection or to transmit COVID-19 to others.

Sources:

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html#vaccination;>

<https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/fully-vaccinated-people.html>

Please Note: Participants who have been granted an exemption must undergo rapid testing at the University's Test Centre site(s) and receive two negative COVID-19 rapid antigen tests per seven-day period. The tests must be separated by a minimum of 72 hours (e.g., if first tested for the week on Monday at 12 p.m., the next test must occur Thursday at 12 p.m. or later in the same seven-day period). The first negative COVID-19 rapid antigen test, as part of this ongoing testing, must be taken within 72 hours before an Individual will be permitted to attend Campus(es). If you fail to participate in rapid testing as required, you will NOT be permitted to attend the University of Windsor campus or attend University of Windsor events.

In completing this form, you will be required to provide personal information including your name, email address, phone number, and identification number. Personal information on this form is collected under the authority of the University of Windsor Act and will be used to determine the qualification of the person identified on this form for a medical exemption from the requirements of the University of Windsor's vaccination requirements. If an outbreak of COVID-19 takes place, your personal information may be disclosed to the Windsor-Essex County Health Unit or other applicable Public Health Unit to assist with contact tracing efforts. Questions about this collection should be directed to: fippa@uwindsor.ca. The University of Windsor complies with the *Freedom of Information and Protection of Privacy Act*.

SECTION 2 - Declaration of Physician or Registered Nurse in the Extended Class (Nurse Practitioner) Qualified in the Province of Ontario

I,

(Name of physician or registered nurse in the extended class qualified in the Province of Ontario)

certify that, I am a physician or registered nurse in the extended class qualified to practice in the Province of Ontario and that I have personally assessed and treated the above individual. It is my opinion that due to a medical condition, the named person should be exempted from the University of Windsor's vaccination requirements.

In accordance with the National Advisory Committee on Immunization (NACI), there are limited reasons a person should not be vaccinated against COVID-19. **Please select the reason for the medical exemption requested from the options below:**

- My patient has acute symptoms of COVID-19 and is currently infectious to others (please outline when your patient is expected to recover and be able to receive the vaccine, below).
- My patient has a history of severe allergic reaction (i.e. anaphylaxis) to any component of the vaccine or after previous administration of a COVID-19 vaccine (please describe below).
- My patient experienced myocarditis or pericarditis following the first dose of an mRNA COVID-19 vaccine and must delay their second dose.
- Other – please describe in detail the medical condition of your patient that presents more risk than benefit for administering the COVID-19 vaccine (please attach additional pages as required).

Please state the effective time period for the medical reason.

SECTION 3 – Signature of Physician or Registered Nurse in the Extended Class (Nurse Practitioner) Qualified in the Province of Ontario

Name of Physician or Registered Nurse in the Extended Class (Nurse Practitioner) Qualified in the Province of Ontario			Registration/License No.
Business Address			
Telephone Number			
Unit Number	Street Number	Street Name	P.O. Box
City/Town	Province/State/Country		Postal Code
Signature of Physician or Registered Nurse in the Extended Class (Nurse Practitioner) Qualified in the Province of Ontario			Date

National Advisory Committee on Immunization (NACI):

https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci/recommendations-use-covid-19-vaccines.html?hq_e=el&hq_m=2188311&hq_l=1&hq_v=91d220e044#a7.9