

Hempfield School District
Face Covering Order Exemption Request – Medical, Mental Health, Disability
2021-2022

Name of Student: _____ Grade: _____ Date of Birth: _____

The recent order from the Acting Secretary of the PA Department of Health, effective Tuesday, September 7, 2021, states that a school entity must provide reasonable accommodations for individuals who state they have a medical condition, mental health condition or disability that makes it unreasonable for the person to maintain a face covering.

The Hempfield School District understands that it may be difficult to obtain a letter from the student's medical provider in such a short period of time. Given the short notice, the Hempfield School District will accept the documentation below with the understanding parents/guardians may need to participate in additional discussions with District personnel and that the school district may need additional documentation from the student's medical provider.

I, parent/guardian of the above student, am requesting an exemption for my student from the PA Department of Health Safety Order requiring face coverings at school.

Reason why the student meets the following exemption: If wearing a face covering would either cause a medical condition, or exacerbate an existing one, including respiratory issues that impede breathing, a mental health condition or a disability.	
Name of student's medical provider:	
Medical provider phone number:	
Medical provider address:	

By signing below, I acknowledge that the information above is correct and documented with my student's medical provider. I also understand that my student will be required to wear a facial covering on school buses and if not vaccinated, will be required to quarantine if identified as a close contact to someone who is COVID+.

Parent/Guardian Name: _____
(Print Name)

Parent/Guardian Signature: _____ Date: _____