

Health Care Provider Certification Form

(COVID-19 Vaccination Exemption)

Dear Health Care Provider:

Pursuant to California Department of Public Health Orders and County of San Mateo policy, employees of the County of San Mateo working in specified facilities are required to receive a vaccination against COVID-19 as a condition of employment. The employee named above seeks an exemption to this requirement due to a disability or medical condition that does not allow them to safely receive a COVID-19 vaccination.

Please complete this form to assist the County of San Mateo in the reasonable accommodation process.

CERTIFICATION FOR VACCINATION EXEMPTION

I c	ertify the following:	
1.	I am a health care provider duly licensed to practice, and qualified to evaluate the medical condition of the employee named above and provide the information below.	
	My profession is:	
2.	The employee named above cannot receive the COVID-19 vaccine due to a health condition that prevents the employee from safely receiving the vaccination (do not identify the underlying medical condition or disability)	
3.	This exemption is (choose one):	
	 Temporary, expiring on:/20), or when (describe condition(s) for termination of exemption) 	
		_
	 Permanent 	
4.	The employee has a medical condition that does not allow the employee to receive a vaccination against COVID-19 and that makes one or more major life activity(ies) ¹ difficult to perform.	
	pertify the above information to be true and accurate, and I request exemption from the COVID-19 vaccination quirement for the above-named employee.	
Pri	int NameLicense No	
Ph	one Number Area of Practice	
Da	ate Health Care Provider's Signature	

County Employee: To request a medical accommodation from COVID-19 vaccination requirements, submit the Employee Request for Medical Accommodation form and the Health Care Provider Certification Form (COVID-19 Vaccination Exemption) to the County's ADA Coordinator [Alicia Kellie; akellie@smcgov.org] This information will be kept in a confidential file separate from the personnel file, and access will be limited to those with a need-to-know.

¹¹ Major life activities include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, interacting with others, and working. Major life activities include the operation of major bodily functions, including functions of the immune system, special sense organs and skin, normal cell growth, digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal, and reproductive functions. Major bodily functions include the operation of an individual organ within a body system.