



Use of Face Covering Exemption Form

All students and staff members are required to wear masks/face coverings during the current health issues caused by the COVID-19 virus, as recommended by the CDC. MPS recognizes that a small number of students/staff members may have a specific condition that would make the practice of wearing a mask/face covering inadvisable. ***These special circumstances must be exempted by a physician.***

The CDC states "face coverings should NOT be worn by children under the age of 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance." <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html>

In order to secure an exemption from wearing a face covering, please take this form to your physician. Your physician will need to fill out the information, sign and date the form.

To Be Completed By The Parent/Staff Member

I, _____, parent/guardian/staff member

am requesting an exemption for myself or my student, _____, from wearing a mask/face covering. Please list health condition which precludes your child from wearing a mask/face covering:

(specific condition)

Physician's Recommendation

The above named student/staff member should be exempt from the requirement of wearing a mask/face covering. (please check one)

____ Yes ____ No

Since this student/staff member cannot wear a mask/face covering, can he/she wear a face shield for protection? (please check one)

____ Yes ____ No

Physician Signature

Date

Physician Name (Print)

Physician Phone Number

Signature of Parent/Staff Member

Date