



## COVID 19 VACCINATION POLICY AND PROCEDURE

### PURPOSE

Seattle Academy is dedicated to returning, to the extent possible, to a lively and dynamic campus where all SAAS community members can flourish. Seattle Academy is also committed to advancing the health of our community members, promoting the safety of our in-person, campus environment, and contributing to the decline of the COVID-19 pandemic. Department of Health guidelines state that schools should begin verifying vaccination status of all students, staff and visitors and promoting vaccinations throughout its school communities.

After careful deliberation, and consideration of federal and regional guidelines, Seattle Academy is requiring all community members, including students, employees, or visitors coming to campus when and where students are present, to be vaccinated against COVID-19 in order to attend or be employed by Seattle Academy.

### OUR POLICY

Proof of full vaccination is required for all vaccine eligible students (those age 12 and above), service providers, employees, and visitors to return to school for the 2021-2022 Academic Year by the date(s) outlined below.

This requirement applies equally to those who have previously been diagnosed with COVID-19.

Any vaccine authorized for use in the United States is acceptable. An individual must be fully vaccinated by the schedules set forth below for employees and students, respectively, to be on campus. For vaccines authorized at this time, that means that two weeks must have passed **before** the deadlines below.

### **Students**

No later than August 1, 2021, all vaccine eligible (age 12 and above) students will provide one of the following forms of documentation to verify their vaccination status:

- CDC vaccination card which includes name of person vaccinated, type of vaccine provided, and date(s) administered, or a photo of the vaccination card; or
- Documentation of vaccination from a health care provider with the information listed above; or
- State immunization information system record with the information listed above.

NOTE: Parental or personal attestation is not an acceptable form of verification for vaccination status.

### **OR**

No later than August 1, 2021, a request to begin the vaccination exemption process should be made by contacting [Safety@seattleacademy.org](mailto:Safety@seattleacademy.org). Students who have not provided information will not be permitted to be on campus in any capacity until fully vaccinated or the vaccination exemption process has been completed.



**Students who are under 12 years of age** do not have to submit an exemption request before August 1, 2021, as they are currently ineligible to receive the COVID-19 vaccination. If a student reaches the age of 12 during the school year or if vaccine eligibility expands to include students under 12, that student will have 60 days from that date to 1) provide proof of being fully vaccinated as described above; or 2) complete the exemption request process as described above.

### ***Employees***

No later than August 1, 2021, employees will provide one of the following forms of documentation to verify their vaccination status:

- CDC vaccination card which includes name of person vaccinated, type of vaccine provided, and date(s) administered, or a photo of the vaccination card; or
- Documentation of vaccination from a health care provider with the information listed above; or
- State immunization information system record with the information listed above.

NOTE: Personal attestation is not an acceptable form of verification for vaccination status.

Employees hired after August 1, 2021, will need to provide the verification of their vaccination status by submitting one of the forms of documentation listed above to [Safety@seattleacademy.org](mailto:Safety@seattleacademy.org) prior to their first day of employment.

Employees hired after August 1, 2021, will not be permitted to begin working in any capacity until fully vaccinated or until they have completed their vaccination exemption process.

Employees needing to request an exemption need to contact Human Resources, at [gconfehr@seattleacademy.org](mailto:gconfehr@seattleacademy.org).

### ***Service Providers/Visitors***

Service Providers/Visitors coming to campus when and where students are present will be required to show one of the following proofs of vaccination prior to their visit to campus or upon arrival.

- CDC vaccination card which includes name of person vaccinated, type of vaccine provided, and date(s) administered, or a photo of the vaccination card; or
- Documentation of vaccination from a health care provider with the information listed above; or
- State immunization information system record with the information listed above.

NOTE: Personal attestation is not an acceptable form of verification for vaccination status. Exemption requests will be reviewed on a case-by-case basis.



## EXEMPTIONS

Students and employees may request an exemption from the vaccination requirements for medical or non-medical (e.g. religious, strongly held personal belief) reasons, including for reasons provided in Washington and federal law, by the following process:

Students and employees who are not able to be vaccinated for a medical reason may seek a medical exemption. The process to request a medical exemption will require the student or employee to provide supporting documentation from a healthcare provider.

Students and employees may seek a non-medical (e.g. religious or strongly held personal belief) exemption and will be required to provide sufficient information to support the request.

**Students who are under 12 years of age** do not have to submit an exemption request before August 1, 2021, as they are currently ineligible to receive the COVID-19 vaccination. If a student reaches the age of 12 during the school year or if vaccine eligibility expands to include students under 12, that student will have 60 days from that date to 1) provide proof of being fully vaccinated as described above; or 2) complete the exemption request process as described above.

For students, please contact [safety@seattleacademy.org](mailto:safety@seattleacademy.org) for the exemption process to begin.

For employees, please contact Giselle Confehr in Human Resources at [gconfehr@seattleacademy.org](mailto:gconfehr@seattleacademy.org) for the exemption process to begin.

Exemption requests must be submitted by August 1, 2021 and be completed before students return to activities in the Fall. Exemption requests will be reviewed on a case-by-case basis.

## CONSEQUENCES

Students who are not fully vaccinated or who have not requested exemptions may not attend class, or attend campus activities, and may be subject to registration holds, disciplinary actions, and/or other requirements or restrictions to support community health. Students who are found to have falsified information related to their vaccination status or eligibility for an exemption may be subject to registration holds, disciplinary actions, and/or other requirements or restrictions to support community health.

Employees who are not fully vaccinated or who have not requested an exemption by the deadlines above may be subject to disciplinary action including possible dismissal from employment. Employees who are found to have falsified information related to their vaccination status or eligibility for an exemption may be subject to disciplinary action including possible dismissal from employment.

Seattle Academy will adjust this policy if appropriate and necessary in light of changing circumstances and experience and communicate it through SAFE at SAAS updates throughout the school year.



SEATTLE ACADEMY 2021-22 SCHOOL YEAR  
REQUEST FOR EXEMPTION/ACCOMMODATION for COVID-19 IMMUNIZATION

Date: \_\_\_\_\_

This request is being made on behalf of

\_\_\_\_\_ Myself, as an employee of Seattle Academy

\_\_\_\_\_ Myself, as a student of Seattle Academy over 16 years of age

\_\_\_\_\_ A student in my care      Name of student: \_\_\_\_\_

Please Identify the exemption you are seeking.

\_\_\_ I am seeking a medical exemption. Please have your health care provider complete and return the attached **REQUEST FOR MEDICAL EXEMPTION/ACCOMMODATION for the COVID-19 IMMUNIZATION** form. I understand I may be required to provide supporting documentation or to provide additional information supporting this request.

\_\_\_ I am seeking an exemption based on a sincerely held religious belief or practice. Please complete and return the attached **REQUEST FOR TO EXEMPTION FROM COVID-19 VACCINATION FOR BELIEF** form. I understand I may be required to provide supporting documentation or to provide additional information supporting this request.

**Verification and Accuracy:**

I verify that the information I am submitting in support of my request for an exemption/accommodation is complete and accurate to the best of my knowledge, and I understand that any intentional misrepresentation contained in this request may result in disciplinary action as described in the Vaccination Policy Statement attached below and available in the Student and/or Employee Handbook.

I understand that my request for an exemption/accommodation may not be granted if it is not reasonable, if it poses a direct threat to the health and/or safety of others at the school, and/or to me, or if it creates an undue hardship on Seattle Academy.

I understand that safety protocols and requirements may differ based on an individual's vaccination status (i.e. wearing masks, daily attestation screening, testing, etc.) while in attendance at Seattle Academy or its activities.

I understand the policy allowing exemptions may change during this school year should Seattle Academy decide or be directed by relevant governing authorities.

I have reviewed, understand, and take responsibility for the health and safety responsibilities associated with requesting an exemption and not being or having my student vaccinated for COVID.

Print Name of Requestor: \_\_\_\_\_

Signature of Requestor: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone: \_\_\_\_\_



**REQUEST FOR MEDICAL EXEMPTION/ACCOMMODATION for the COVID-19 IMMUNIZATION**

Name of Student or Employee: \_\_\_\_\_

**Attention Health Care Provider:** Seattle Academy requires a COVID-19 vaccination as a condition of employment or to attend classes in the Fall of 2021. The above named employee/student/student's family is requesting an exemption from this vaccination requirement due to medical reasons. A medical exemption from the COVID-19 vaccination may be allowed for certain recognized conditions.

**Please complete the form below.**

**The above person should not be immunized for COVID-19 for the following reasons (Please check all that apply.):**

History of previous allergic reaction to indicate an immediate hypersensitivity reaction to a component of the vaccine.

The physical condition of the person or medical circumstances relating to the person are such that immunization is not considered safe. Please indicate the probable duration of the medical condition or circumstances that contraindicate immunization with the COVID-19 vaccine.

Other – Please provide this information in a separate narrative that describes the need for medical exemption.

I certify that \_\_\_\_\_ has the above condition and request a medical exemption from the COVID-19 vaccination.

Health Care Provider Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone number: \_\_\_\_\_

Please contact [Safety@seattleacademy.org](mailto:Safety@seattleacademy.org) for questions regarding a **Student's, Visitor or Service Provider's** exemption request.

Please contact Giselle Confehr at [gconfehr@seattleacademy.org](mailto:gconfehr@seattleacademy.org) for questions regarding an **Employee's** exemption request.

Thank you.



## REQUEST FOR TO EXEMPTION FROM COVID-19 VACCINATION FOR BELIEF

I am seeking an exemption for \_\_\_\_\_ (myself, name of student) based on my sincerely held religious or personal belief or practice. I understand I may be required to provide supporting documentation or to provide additional information supporting my request.

Please explain the basis for your request for an exemption due to sincerely held religious or personal belief or practice:

Please SUBMIT the completed form to or contact [Safety@seattleacademy.org](mailto:Safety@seattleacademy.org) for questions regarding a **Student's, Visitor or Service Provider's** exemption request.

Please SUBMIT the completed form to or contact Giselle Confehr at [gconfehr@seattleacademy.org](mailto:gconfehr@seattleacademy.org) for questions regarding an **Employee's** exemption request.

Thank you.