

COVID-19 Vaccination Policy Vaccination Declaration

Purpose of this Form:

The Municipality recognizes immunization is a control measure against the spread of COVID-19 and requires all staff, per policy H-37 Workplace COVID-19 Vaccine Policy, to make a declaration regarding their current vaccination status. This form is intended as an initial intake for all staff and provides individuals that are not fully vaccinated and are claiming an accommodation for medical or other reasons under the protected grounds of the *Ontario Human Rights Code* (the Code), to take the necessary steps in the accommodation process.

process.	
Declaration:	
Name (please print):	
☐ I have read and understand this Policy	
Select and complete one (1) of the options below that describes your current vaccination status:	
☐ I have received one (1) dose of a two (2) dose regime, or,	
☐ I am fully vaccinated, and I have attached/included a copy of my Proof of Vaccination, or,	
☐ I have not received a vaccination dose however have an appointment scheduled. Date of first dose:	
☐ I attest that this information is true and accurate regarding my current vaccination status.	
OR	
☐ I seek an accommodation under a protected ground of the <i>Ontario Human Rights Code</i> and I have completed and attached either the Request for Accommodation for a Medical Exemption or Request for Accommodation Creed/Religious Exemption form.	
By selecting this option, I understand that this is not approval of my accommodation request and that Human Resources will contact me regarding the accommodation process based on the information I have submitted.	
OR	
☐ I have read and understand this risks of the COVID-19 vaccine and I am choosing not be immunized against COIVD-19, or refuse to disclose my vaccination status and by doing so, I understand that I will be subject to the same consequences of non-compliance as individuals who are not vaccinated.	



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I agree with the above information and certify that all information provided is true and accurate.

Signature of Employee:	
Department:	
Date:	

To submit this form, please scan and email a copy to HRVaccine@clarington.net

Personal Information contained on this form is collected under the authority of the Municipal Act and the subsection 25(2)(h) of the Ontario Occupational Health and Safety Act. The information will only be used and disclosed in accordance with the Clarington COVID-19 Vaccine Policy. Questions about the collection, use, or disclosure of your COVID-19 vaccination information can be directed to the Municipal Clerk.