

Urbana City Schools

Dedicated to Excellence 711 Wood Street – Urbana, Ohio 43078 937/653-1402 – 937/652-3845 Fax www.urbanacityschools.org

> Mandy Hildebrand Treasurer

Face Mask Exemption Form 2021-22

Beginning Monday, September 27, 2021, the Urbana City School District Board of Education is requiring all staff and students to wear a face mask when in the school buildings.

For those students that are unable to wear a face mask while at school for medical reasons, we ask that you collaborate with their physician to complete the form below and return it to your building principal. For those students that are not permitted to wear face mask for religious reasons, please provide additional information on the back of this page, sign the form, and return it to your building principal.

Those with approved face mask exemptions will be required to wear a face shield instead. Additional documentation will be required for an exemption from wearing a face shield.

By submitting this form exempting my child from wearing a required face mask, I acknowledge increased risk of exposure to COVID-19.

MEDICAL EXEMPTION

My patient has a documented disability, medical, or developmental condition such that he/she cannot safely wear a face mask for reasons related to the disability or condition. (Documentation from medical provider must be attached, and advise us with your best practice medical options to keep this students safe while at school or any school activity.)

It is not advisable for		to wear a face covering.
	(Print Student Name)	
Physicians Signature		Date
Physician Name		Phone Number
Practice Address		

Ohio law prohibits any person from knowingly making a false statement with the purpose of misleading a public official in performing the public official's official function. See Ohio Revised Code Section 2921.13(A)(3).

Board of Education: – Jim Arter – Jan Engle – Sarah Finch – Amy Paul – Darrell Thomas

Charles Thiel Superintendent

RELIGIOUS EXEMPTION

It is not advisable for _____

(Print Student Name)

_____ to wear a face covering.

In the space below, please provide a personal written and signed statement detailing the religious basis for your face mask objection, explaining (1) why you are requesting this religious exemption for your child, (2) the religious principle(s) that guide your objections to masks, and (3) the religious basis that prohibits the wearing of a face mask during the current pandemic. Please attach additional documentation, if necessary.

Parent/Guardian Signature _____ Date _____

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