

Request for COVID-19 Vaccination Exemption

All questions must be answered in full, be legible, and submitted with appropriate supporting medical or applicable exemption information. Failure to meet these requirements or the employer's inability to reach the employee to obtain additional information, if required, may jeopardize the review and approval of the exemption request.

Please note the submission deadline of October 29, 2021 is to ensure adequate time for review and decision response.

In the event submissions are received after the Oct 29 submission deadline and not adjudicated by Nov 30, the employee will be required to produce a negative PCR (molecular polymerase chain reaction) or a Health Canada approved rapid antigen or rapid PCR test result, date stamped within 72 hours of every scheduled work day/shift on an ongoing basis. This test will be paid for by the employee and on their own time. Should a request not be adjudicated by Dec 14, the employee may be placed on a leave without pay

Employee Name:	Employee Number:	Ministry:
Position:	Home Phone:	Alt. Phone:
Manager Name:	Manager Phone:	

The Government of Alberta (GoA) has implemented a Proof of COVID-19 Vaccination Policy for Alberta Public Service (APS) employees that requires all employees to be fully vaccinated by November 30, 2021, or produce a negative PCR (molecular polymerase chain reaction) or a Health Canada approved rapid test result, dated within 72 hours of every scheduled work day/shift on an ongoing basis, effective December 14, 2021.

If further information or clarification is required after the exemption request form is submitted, the Disability Management representative will make reasonable attempts to contact you by telephone and/or email to discuss the information required. This may include collecting additional documentation.

It is important you understand that by submitting a request for exemption, this does not automatically entitle you to an exemption. Your request will be reviewed and a determination will be made based on an individualized assessment conducted by the GoA. You are required to facilitate the process by cooperating with the GoA's assessment of your exemption request. Failure to cooperate in the process could jeopardize the review and any approval of the exemption request.

Employee Acknowledgement:

I have read and understand the content of this form. I consent to be contacted at the contact phone number and/or email that I have provided for this application.

Employee Signature: _____

Date: _____

Submit completed form to:

Wellness, Health and Safety
VaccinationExemptionRequests@gov.ab.ca

All personal information is collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy Act. It will be used by the Public Service Commission – Labour Relations, Policy and Programs Division in the administration and review of the Government of Alberta's COVID-19 vaccination policy exemption process. It is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection, contact the office of the Assistant Deputy Minister, Labour Relations, Policy and Programs, Public Service Commission, 7th Floor, Pease Hills Trust Tower, 10011 – 109 Street, Edmonton, AB, T5J 3S8.

Classification: Protected A

Request for COVID-19 Vaccination Exemption – Religious Beliefs

All questions must be legible, answered in full, signed and dated, and submitted by the employee by October 29, 2021. Failure to meet these requirements or the employer's inability to reach any or all parties on this form may jeopardize the review and any approval of the exemption request. Exemptions will be reviewed and assessed on the basis of a protected ground as per the [Alberta Human Rights Act](#).

This page must be completed by the Employee and witnessed by a Commissioner for Oaths and sent to: VaccinationExemptionRequests@gov.ab.ca along with the additional supporting documentation as requested below.

Employee Name:	Date:
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Please specify the religious organization, belief, practice, and observance that is the basis for your request for accommodation.

Please explain how the requirement to be fully vaccinated against COVID-19 conflicts with the religious organization, belief, practice, and observance described above.

Please **attach** the doctrine(s) and/or spiritual observance(s) on which those teachings are based on that supports your position as stated above and that you are a member of.

Employee

I, _____, of the _____ of _____, in the Province of Alberta, make oath and say:

1. The Government of Alberta Proof of COVID-19 Vaccination Policy requirement conflicts with my sincerely held convictions based on my religious organization, belief, practice and observance as outlined above.
2. I understand that if my exemption request is successful, the Government of Alberta may still require me to follow other health and safety measures, including, but not limited to: COVID-19 testing as per the Government of Alberta's Policy.

Commissioner for Oaths in and for the Province of Alberta

Sworn (or affirmed) before me in the _____ of _____ in the Province of Alberta, this _____ day of _____, 20____.

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Print Name and Expiry Date

Signature

* The cost of completing this form is the sole responsibility of the employee.

Employee Acknowledgement:

I confirm that the information provided in this application is true, complete and accurate.

Employee Signature: _____

Date: _____

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