



Renwick USD 267 Medical Face Mask Exemption

As parent or guardian, you must request permission to receive a medical exemption to the USD 267 face mask requirement. If an exemption is approved by a medical provider, your child will be flagged in our system, and not be required to wear a face mask. Please return this completed form to your child's school. One of the following conditions must be met in order to be exempt:

- A. Persons with a medical condition
- B. Persons with a mental health condition
- C. Persons with a disability that prevents wearing a face covering (includes persons that wearing a face covering could obstruct breathing or persons who are unconscious, incapacitated, or otherwise unable to remove a face covering without assistance)
- D. Persons who are deaf or hard of hearing, or communicating with a person who is deaf or hard of hearing, where the ability to see the mouth is essential for communication
- E. Persons for whom wearing a face covering would create a risk to the person related to their work, as determined by local, state, or federal regulators or workplace safety guidelines.

Student Name: _____ **Grade:** _____ **Date of Birth:** _____

Parent Name: _____ **Parent Signature:** _____

The above named student has requested a medical waiver for exemption to the USD 267 requirement of face masks. As a result, USD 267 requires medical verification on file for the following information.

Is it medically necessary for this student to not wear a mask as required by Renwick Public Schools?

Yes **No**

Please state specific exemption condition from A through E above: _____

Name & Address of Medical Provider _____

Signature of Health Care Provider: _____ Date: _____

Phone: _____ Fax: _____

- Please attach a note from your medical provider on medical letterhead
- Medical Provider-(MD, DO, ARNP, PA, DC)
- Return completed form to school administrator