

Request for Mask Exemption Form



COVID-19 is spread primarily through respiratory droplets. While a mask does not provide 100% protection from the virus, when worn properly, it helps to capture the droplets that propel from your nose and mouth and adds a layer of protection. **To protect the health of our students and staff**, and to comply with Johnson County Public Health Order 001-21, Olathe Public Schools requires that all people entering district buildings wear masks or other face covering.

Exemptions are identified in Public Health Order 001-21 and will be considered on a case-by-case basis. Those meeting one of these criteria may request exemption by completing this form. **Please mark below the type of documentation already on file with the school district** that identifies the qualifying condition that prevents mask wearing. Those unable to wear a mask, are encouraged to utilize another method such as face shields to provide some protection.

- IEP
- 504 Plan
- Emergency Action Plan/Individualized Health Plan

Documented condition preventing mask wearing: _____

Individuals without prior documentation of a qualifying medical or mental health condition may request an exemption by submitting this form completed by the treating physician or specialist documenting the condition that prevents mask wearing.

Physician Statement:

The individual listed below has a medical condition that prevents them from wearing a mask and therefore, should be exempted from the requirement to wear a mask while in Olathe Public School buildings.

Name of Student/Staff: _____

Condition preventing mask wearing: _____

Physician Signature (MD, DO, APRN, PA)

Date

RETURN COMPLETED FORM TO THE SCHOOL NURSE OR BUILDING ADMINISTRATOR