Milan Area Schools **Student Mask Medical Exemption Request**

During certain CDC Transmission Levels, Milan Area Schools will be requiring students to wear face masks during some or all of the school day to prevent the spread of COVID-19.

To be con	npleted by parent/guardian		
l re	equest that my child,	not be, cally tolerate wearing a face mask. ¹ I und	required to wear a face mask
	·		
1.	COVID-19;	hool, my child may be at increased risl	k of contracting or spreading
2.	2. the school may take additional safety precautions, including requiring my child to distance from others wear a face shield, or wear other personal protection equipment, to protect others from contracting COVID-19;		
3.		e learning options for my child, including	y whether distance learning is
4.	4. my child may be referred for an evaluation to determine if a disability prevents my child from wearing a face mask and whether and to what extent accommodations will be provided;		
5.	5. if my child demonstrates symptoms of COVID-19, tests positive for COVID-19, or is in close contact with someone who tests positive for COVID-19, I will promptly notify my child's principal; and		
6.		s of COVID-19, tests positive for COVID-	
		OVID-19, my child may be required to re	emain out of school for 10-14
	days as directed by public health of	iliciais.	
Parer	nt/Guardian Name (Print)	Parent/Guardian Signature	Date
To be con	npleted by medical professional ²		
l ce apply]	ertify that I have examined the stude	nt identified above and it is my professior	nal opinion that: [check all that
	The student is medically able to we	ear a face mask at school.	
	The student has a physical or mer school if accommodations are prov	ntal impairment, but the student can tole ided (e.g., periodic breaks).	erate wearing a face mask af
	•	tal impairment that prevents the student	from wearing a face mask at
		mpairment that limits or prevents the stud affects the student's ability to tolerate a fa	
Medica	al Professional's Name (Print)	Medical Professional's Signature	Date
		your exemption request will be granted. The Dis ents and public health recommendations and di	



¹ If you believe your child requires an exemption to the face mask requirement for a nonmedical reason, please contact the District's superintendent, in writing, to explain the basis for that exemption.

² A medical professional means a physician or physician's assistant as defined in the Michigan Public Health Code.