

www.bloomfield.org | 248.341.5407 | @BHSchools 7273 Wing Lake Road, Bloomfield Hills, Michigan 48301

## **Request for Facial Covering Medical Exemption Form**

Per the "MI Safe Schools: Michigan 2020-21 Return to School Roadmap" Policy Manual, it is required that facial coverings must always be worn by students in Grades PreK through 12 except while eating. Any student who is unable to medically tolerate a facial covering or who is incapacitated or unable to remove the facial covering without assistance, must not wear one.

In order to properly document the medical condition that precludes wearing a facial covering, your student's licensed medical provider (MD, DO, PA, or NP) must complete the following form.

Date:	
Student Name:	DOB:
School of Attendance:	Grade:
Student's Medical Condition:	
Please initial all of the statements below that apply to	o this student:
Student has a medical condition that causes	him or her to be unable to tolerate wearing a facial <mark>mask</mark>
Student has a medical condition that causes	him or her to be unable to tolerate wearing a facial shield
Student is physically unable to remove a faci	al covering without assistance.
Printed Name of Medical Provider	Medical Provider Office Phone Number

Return this form to:

**Medical Provider Signature** 

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