# **Vaccination Policy: Mandatory**

### **Purpose**

In accordance with [Company Name]'s duty to provide and maintain a workplace that is free of known or reasonably foreseeable hazards, we are adopting this policy to safeguard the health of our employees; our customers and visitors from infectious diseases, specifically COVID-19 and its variants.

### Scope

Effective immediately [or choose effective date] it is a condition of employment to be fully vaccinated in accordance with recommendations and guidance from the Centers for Disease Control and Prevention (CDC). All employees are required to receive vaccinations as determined by [insert relevant department or safety committee], unless a reasonable accommodation is requested and approved. Employees not in compliance with this policy will [choose one]

- be terminated from employment
- be placed on unpaid leave until their employment status is determined by the human resources department.
- work offsite, if suitable, until their employment status is determined by the human resources department.
- be subject to health and safety protocols should they report to the worksite, including weekly or twice weekly testing on an ongoing basis until fully vaccinated.

#### Verification

To establish that they have received a vaccination, within \_\_\_\_ days of the effective date of this policy, employees shall present written evidence of vaccination by presenting the following documents if they list COVID-19 vaccines authorized for Emergency Use Authorization in the United States and/or the World Health Organization, along with an administration date for each dose:

- a. The CDC COVID-19 Vaccination Card issued to the vaccine recipient by the vaccination site, or an electronic or physical copy of the same;
- b. Official record from the New Jersey Immunization Information System (NJIIS) or other State immunization registry;
- c. A record from a health care provider's portal/medical record system on official letterhead signed by a licensed physician, nurse practitioner, physician's assistant, registered nurse or pharmacist;
- d. A military immunization or health record from the United States Armed Forces; or

e. Docket mobile phone application record or any state specific application that produces a digital health record.

# Confidentiality

Documentation of vaccination status shall be treated as a medical record under the Americans with Disabilities Act (ADA).

### **Reasonable Accommodation**

Employees in need of an exemption from this policy due to a medical reason, or because of a sincerely held religious belief must contact the human resources department to begin the interactive accommodation process as soon as possible. In order to evaluate such a request, [Company Name] may require the submission of relevant medical documentation or religious beliefs. Such documentation shall be used only for this purpose and will be treated confidentially to the extent required by law. Accommodations will be granted where they do not cause [Company Name] undue hardship or pose a direct threat to the health and safety of others.

## Other Health and Safety Rules

Regardless of vaccination status, all other present or future health and safety rules apply, such as testing, screenings, mask wearing, physical distancing, travel restrictions and quarantine.

Please direct any questions regarding this policy to the human resources department.