

County Administrator

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Monica Nino

County Administrator

Contra Costa County



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Contra Costa County Mandatory COVID-19 Vaccination Exemption Request Form

I hereby acknowledge that Contra Costa County requires all employees to be vaccinated to stop the spread of the COVID-19 virus. **I understand that if my request for exemption is approved, I must have a qualifying exemption and I will be required to submit to weekly testing due to my unvaccinated status, or testing on a more frequent basis as required in any law or health order applicable to my position. I also understand that I must continue to wear a mask or other approved or required face covering at all times while working indoors with others.**

I am requesting an exemption from the COVID-19 vaccination requirement due to the following qualifying reason:

_____ Qualified Medical Reason. As required by Contra Costa County, I have attached a medical certification signed by my licensed physician, licensed nurse practitioner, or other licensed medical professional acting under the license of my physician affirming that I qualify for this exemption. This certification shall include the probable duration of my inability to receive the vaccine. (The medical certification should not describe the underlying medical condition or disability).

_____ Sincerely Held Religious Belief. My religious beliefs mandate that I decline vaccination because:

1. Identify your religion or religious belief system: _____

2. Describe the specific religious tenet, practice, or observation that conflict with the COVID-19 vaccination requirements and Explain how you adhere to it (Attach additional pages if necessary): _____

I declare under penalty of perjury that the foregoing is true and correct, and that this exemption request was executed on the date and at the location below.

Signature

Print Name

Classification

Department

Date

Executed at: _____, CA
City

A copy of this declination form and supporting documents must be given to your departmental personnel officer.

If your request is approved, it is your responsibility to advise your direct supervisor that you have an approved exemption from the COVID-19 vaccination requirement and have provided the exemption request form to your departmental personnel officer.