

Muncy School District

District Office
206 Sherman St.
Muncy, PA 17756
(570) 564-3125
(570) 546-6676 Fax

K- 12 VISITOR MASK MEDICAL LIMITATION/EXEMPTION

All visitors who are medically, cognitively, and emotionally able must wear face coverings to ride on a district bus/vehicle, attend school on site and participate in before and after school programs and activities. Visitors are allowed limitations or exemptions to this requirement only when wearing a face covering would either cause a medical condition, or exacerbate an existing one, including respiratory issues that impede breathing, a mental health condition or a disability.

VISITOR: _____

BUILDING: _____

LIMITATION

I have determined the above-named I am **able** to wear:

____ Face mask only: ____ On the bus/van _____ All day ____ Part of the day (# hours _____)
____ Face shield only: ____ On the bus/van _____ All day ____ Part of the day (# hours _____)
____ N/A

Comments:

EXEMPTION

_____ I have determined I am unable to wear a face mask or a face shield for the entire school day, including on a district bus/van, as wearing a face covering would either cause a medical condition, or exacerbate an existing one, including respiratory issues that impede breathing, a mental health condition or a disability.

I am at least 18 years of age and of sound mind, and I hereby confirm that all the statements made in this K- 12 EMPLOYEE VISITOR MEDICAL LIMITATION/EXEMPTION are true and correct to the best of my knowledge, information, and belief.

Parent/Guardian Signature: _____ Date: _____

cc: Principal
School Nurse

PLEASE RETURN THE COMPLETED FORM TO THE APPROPRIATE SCHOOL