Per the Oakland County Health Division Emergency Order for Control of the Pandemic issued on August 24, 2021 it is required that facial coverings must be worn by students in pre-kindergarten through grade twelve and personnel, volunteers, or visitors, regardless of vaccination status, while inside any enclosed school building except while eating or drinking.

This order will not apply to persons who have a medical reason confirmed in writing from a Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO) currently licensed to practice medicine in the State of Michigan.

In order to properly document the medical condition that precludes wearing a facial covering the following form must be completed by a DO or MD.

Date: _______________________________

Student Name: ____________________________________________ DOB: ______________

Student’s Medical Condition: ___________________________________________________________

Please initial all of the statements below that apply to this student:

_______ Student has a medical condition that causes him or her to be unable to tolerate wearing a facial mask.

_______ Student has a medical condition that causes him or her to be unable to tolerate wearing a facial shield.

_______ Student is incapacitated or unable to remove a facial covering without assistance.

Printed Name of Doctor of Osteopathic Medicine or Medical Doctor

__________________________________________________________________________

Signature of Doctor of Osteopathic Medicine or Medical Doctor

__________________________________________________________________________

Office Phone Number of Doctor of Osteopathic Medicine or Medical Doctor

__________________________________________________________________________

Return this form to:
Oxford Community Schools
Student Services Office
10 N Washington
Oxford, MI 48371
FAX: 248-969-5016
Email: StudentServices@oxfordschools.org

8/26/2021