



Annex E – Partially Vaccinated Exemption Form

PARTIALLY VACCINATED EXEMPTION REQUEST FORM

The person must review and submit a completed copy of this form in its entirety, requesting an exemption on the ground that they have received a first vaccine dose **PRIOR** to November 15, 2021 and are waiting to receive the second. Alternatively, the person requesting the exemption may have had their final dose but has not yet completed the 14 days period in order to be considered fully vaccinated prior to November 15, 2021. The employer evaluating this request must do so in accordance with its legal duty to accommodate under the applicable legislation.

PART I OF FIRST DOSE EXEMPTION

Person To Be Exempted

Please provide the following concerning the person for which the exemption is requested:

First Name: _____ Last Name: _____

Home Address: _____

Vaccine Doses

Please provide the requested information concerning the vaccine doses you have received to-date and that you intend to receive in the near future. Note, the second vaccine dose must be received no later than January 24, 2022, and the failure to do so will result in the suspension of your Restricted Area Identity Card.

Date of first vaccine dose received: _____

Anticipated (or actual) date of second vaccine dose: _____

Expected date of being fully vaccinated (14 days after final dose): _____

False Or Misleading Information

It is an offence under section 366 of the [Criminal Code](#) to make a false document, knowing it to be false.

As per the applicable Interim Order Respecting Certain Requirements for Civil Aviation Due to COVID-19, a person who provides information to a carrier that is known to be false or misleading may also be subject to an administrative monetary penalty or other enforcement action, including prosecution.



Personal Information

Personal information you provide in this form will be used for the purposes of determining the qualification of the person identified on this form for exemption from the requirements of the Interim Order Respecting Certain Requirements for Civil Aviation Due to COVID-19 on the ground that they have received a first vaccine dose and are awaiting the second. This information may also be shared with Transport Canada for the sole purpose of audit or enforcement.



PART 2 OF EXEMPTION

Important Notice: Only Part 2 of this exemption is to be provided by the employee, upon request, to the Airport Authority, the Canadian Air Transport Security Authority (CATSA) or Transport Canada. Should additional information be required by Transport Canada, a government official will contact the Employer directly.*

Confirmation of Exemption by Employer*

Employer* Record Number: _____

This is to confirm that _____ (full name of the exempted person),
RAIC/RAP/Temp pass #: _____, has an exemption from the mandatory
vaccination requirements on the ground that they have received a first dose and is waiting to receive the second.

Signature: _____ Full Name: _____

Title: _____ Organisation: _____

Phone number (day): _____

Date: _____ Location: _____

* Part 2 is to be completed by the employer or an organization responsible to validate the exemption request in accordance with the applicable airport-wide mandatory vaccination policy.