



## Volunteer Medical or Religious Exceptions Attestation

1. Acknowledgment of Risk. Portland Public Schools (“PPS”) is committed to the health and well-being of PPS students, faculty, staff, volunteers, and others who use PPS buildings. Volunteer hereby acknowledges that it understands the risk of illness and death presented by COVID-19; in particular, COVID-19 is highly contagious and believed to spread mainly from person-to-person contact, including air-borne transmission. Volunteer specifically agrees to release, indemnify, defend, and hold harmless PPS from any and all COVID-19 related claims, losses, damages, costs, expenses, attorneys’ fees, or liabilities arising out of or related to the presence at a PPS facility. Such claims include, but are not limited to, claims made by Volunteer that such claimant contracted COVID-19 at the PPS facility.

2. Volunteer Obligations:

(a) Attestation of Proof of Exception. Volunteer attests that they shall be responsible for collecting and maintaining proof of exception documentation as required by [OAR 333-019-1030](#). PPS may deny direct or indirect contact with students by volunteers with medical and religious exceptions if the District determines that the exception would constitute an undue hardship on the operation of the District and would pose a direct threat to health or safety.

[Instructions for filling out the COVID-19 Medical Exception Request Form and the COVID-19 Religious Exception Request Form](#)

- [Medical Exception Form](#)
- [Religious Exception Form](#)

(c) Volunteer will comply with all recommendations and guidance for reducing the spread of COVID-19 published by governmental authorities, including the Oregon Health Authority, the Oregon Department of Education, and the Centers for Disease Control and Prevention, such as maintaining physical distancing, using hand-sanitizer, and wearing an approved face covering and will also comply with all rules, guidelines and protocols adopted by PPS for reducing the spread of COVID-19.

3. Print form, sign below and submit along with the appropriate signed attestation form. Submit with your online volunteer application where covid vaccination is requested.

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Print Name

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Signature

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Date