

COVID-19 Vaccination Declaration

Protege School continues to be committed to the safety of our staff members, students, visitors and clients, including protecting our population from COVID-19. Along with our existing public health and personal protective measures, the COVID-19 vaccine is the most effective way to protect ourselves and our students, colleagues and community from COVID-19.

It is important that for Protege School to know the vaccination status of its population to ensure a safe environment for everyone who works, receives training and visits our facilities. In the event of an outbreak, your vaccination status may impact your ability to provide safe working and study environments or continue activities where there is a potential for transmission.

As per Protege School's COVID-19 Vaccination Policy, all Protege's population, employees, staff, students, volunteers and contractors are required to submit a record of vaccination and/or declare their vaccination status to Cheng Tan, Administrative Office , cheng@protegeschool.com by completing this COVID-19 Vaccination Declaration.

If you have questions about the declaration of COVID-19 status policy, please contact: Angela Bennett, angela@protegeschool.com; Tel: 416-754-9866 or/and Jason Dubois, jason.d@protegeschool.com; Tel: 416-299-8585

First Name: _____ **Last Name:** _____

Declaration Decision, (Choose one only).

- Vaccinated:** I have been vaccinated already and have/will provide a record of vaccination to Cheng Tan at School Administrative Office.
- Decline – Medical reason:** I am declining to be vaccinated due to medical reasons and will provide written proof by either a physician or nurse practitioner to Cheng Tan at School Administrative Office.
- Decline – Not getting the vaccine:** I am declining to receive the COVID-19 vaccination. Decline to receive the COVID-19 Vaccination without a valid medical reason, you MUST make this Attestation:
By signing this Declaration, I attest that:
I understand it is recommended I receive the COVID-19 vaccination to protect myself and the entire Protege School's population. I acknowledge that I have completed the attached Appendix C - Protege School COVID-19 Vaccination Education Program - Education Video by Dr. Nathan Stall for AdvantAge Ontario and read/watch all the related COVID-19 information on the list.

Signature: _____ **Date:** _____

Appendix C – Protégé School's COVID-19 Educational Program

1. [COVID-19 Vaccination Education Video](#) (Dr. Nathan Stall for AdvantAge Ontario)
2. [About COVID-19 Vaccines](#) (Ontario Ministry of Health)
3. ****bilingual**** [Building Confidence in Vaccines](#) [English] and [Accroître la confiance à l'égard des vaccins](#) [French] (Public Health Ontario)
4. [Communicating effectively about immunization](#): Canadian Immunization Guide (Government of Canada)
5. ****multilingual**** [Coronavirus disease \(COVID-19\): Awareness resources](#) (Government of Canada);
You must watch all the videos in this link.
More COVID-19 [Awareness and Promotional Resources](#) (Immunize Canada) and Vaccine stories to share with you
6. [Ontario's doctors answer COVID-19 vaccine questions](#) (Ontario Medical Association)
7. [Information on Rapid Antigen Testing](#)