



Policy: SARS-CoV-2 (COVID-19) Vaccination Program

Responsible Officers:	Provost & Executive Vice President for Academic Affairs (Campuses, ANR, Labs) Executive Vice President – University of California Health (UC Health) Executive Vice President and Chief Operating Officer (Campuses, ANR, Labs)
Responsible Offices:	Academic Affairs University of California Health (UCH) University of California Operations (UCO)
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	UC Health	Campuses, ANR, Labs
Contact:	Anne Foster, MD	Amina Assefa
Title:	Chief Clinical Officer	Director, Emergency Management
Email:	Anne.Foster@ucop.edu	Amina.Assefa@ucop.edu
Phone:	(510) 987-0306	(510) 987-9594

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I. POLICY SUMMARY

The purpose of this policy is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Trainees, Personnel and all others who work, live, and/or learn in any of the University's locations or otherwise participate in person in University Programs.

The University strongly recommends that all members of the University community obtain the COVID-19 vaccine as soon as they are eligible. In addition, this policy provides for a COVID-19 Vaccination Program under which any Covered Individual is required, subject to limited deferrals, exceptions, and associated non-pharmaceutical interventions, to be fully vaccinated against COVID-19 before physically accessing the University's Locations and Programs. This policy further provides that Locations must begin collecting proof of vaccination and processing requests for Exceptions and Deferrals for all Covered Individuals no later than July 15, 2021, to facilitate fall planning efforts.

II. DEFINITIONS

Covered Individuals: A Covered Individual includes anyone designated as Personnel, Students, or Trainees under this Policy who physically access a University Facility or Program in connection with their employment, appointment, or education/training. A person accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.

Covered Non-Affiliates: A Covered Non-Affiliate is a person who accesses a University Facility or Program as a Non-Affiliate (other than as an "official volunteer") under the [Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California](#).

Contraindications and Precautions: A contraindication or precaution to COVID-19 vaccination recognized by the [U.S. Centers for Disease Control and Prevention](#) (CDC), or by the vaccine's manufacturer, as based on a condition in the potential vaccine recipient that may increase the risk for a serious adverse reaction to the vaccine, may cause diagnostic confusion if the vaccine is administered, or may compromise the ability of the vaccine to produce immunity. Contraindications and Precautions are limited and do not include conditions that are unrelated to vaccines or injectable therapies, such as food, pet, venom, or environmental allergies, or allergies to oral medications.

COVID-19 Vaccination Program or Program: A set of rules governing Physical Presence at University Locations or in University Programs intended to reduce the incidence of SARS-CoV-2 infection and resultant COVID-19 disease, disability, and death in connection with University Facilities or Programs.

Deferral. An approved deferral of vaccination based on pregnancy. Pregnancy Deferral will extend throughout the term of the pregnancy and until the Covered Individual returns to work or instruction, as applicable.

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Disability: A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.

Exception: An approved exception to COVID-19 vaccination based on a Medical Exemption, Disability, or Religious Objection. For purposes of this policy, a person who is pregnant is not eligible on that basis alone for an Exception, but is eligible for a Deferral for the duration of pregnancy.

Fully Vaccinated: A person is considered “fully” vaccinated when two weeks have passed since they completed a COVID-19 Vaccine series (for example, 1 dose of the Janssen/J&J vaccine, or 2 doses within no more than 12 weeks of the Moderna or Pfizer vaccine); as well as any boosters consistent with manufacturer instructions and applicable agency approval, authorization, or listing.

Healthcare Location: A collection of buildings and Personnel that service an academic health system including hospitals, ambulatory surgery centers, outpatient centers, clinics, or other locations where preventive, diagnostic, therapeutic, or other interventional physical or behavioral healthcare services are provided to UC Health patients, employees, or research participants and any associated educational, research, or administrative facilities and offices. A Healthcare Location refers only to that part of a campus that meets this definition and does not include student health and counseling centers.

Implementation Date: The deadline for initial implementation of the Program, which is two (2) weeks before the first day of instruction at any University campus or school for the Fall 2021. For locations that do not operate on an academic calendar (e.g., UCOP, ANR, medical centers, national laboratories), the deadline is September 1, 2021. For new employees whose first date of employment is later, the deadline is 8 weeks after the first date of employment. For students starting or returning to campus after Fall 2021, the deadline is the first date of instruction for the term when they first enroll.

Location (or Facility): Any United States campus, medical center, or facility operated by the University in connection with its research, teaching, or public service (including clinical care) missions or programs, including University housing. A Location does not include a property owned by the University but leased to a third party unless (and only to the extent) a University Program occurs at that site.

Location Vaccine Authority (LVA): The office or person responsible for implementing the COVID-19 Vaccination Program for a Location, typically the Chief Medical Officer or Occupational Health office at a Medical Center or an Occupational Health or Student Health office at an academic campus. The LVA is a health care provider and its records are considered confidential health records for purposes of the University’s privacy policies.

Medical Exemption: An excuse from receiving COVID-19 vaccine due to a Medical Contraindication or Precaution.

Non-Pharmaceutical Intervention (NPI): An action, other than getting vaccinated or taking medicine, that members of the University community can take to help prevent or

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slow the spread of COVID-19 and other contagious illnesses. NPIs include, for example, staying home, especially when a person is sick or when a member of the person's family or household is sick; quarantining when an unvaccinated person has been exposed to someone else with the illness; avoiding large gatherings; physical/social distancing; wearing personal protective equipment or face coverings; frequent handwashing and cleaning; and asymptomatic (surveillance) and symptomatic testing.

Participation: Participation in the COVID-19 Vaccination Program (by providing proof of vaccination or obtaining an approved Exception or Deferral under this policy). Participation is a condition of Physical Presence at any University Location or Program as set forth in this policy. For Covered Individuals who must be vaccinated under this policy, Participation compliance will require repeat vaccinations or boosters on an annual or recurring basis consistent with FDA-approved labeling and CDC recommendations.

Personnel: University faculty, other academic appointees, and staff, including but not limited to visiting, volunteer, without salary, and emeritus/a professors, visiting or volunteer academic appointees, contract, recall, and emeritus/a employees. "Personnel" also includes, for purposes of this policy, official volunteers, as defined in the [Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California](#).

Physical Presence: Physical presence at a University Location or Program for any work, research, or education/training related purpose (as distinguished from accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public). Physical presence includes living in housing furnished by the University, using University amenities such as entertainment venues, museums, libraries, workout facilities, or dining halls or food courts in one's capacity as Personnel or a Student or Trainee, or participating in person in a University Program even if not occurring at a Location. Access is not defined by reference to any particular frequency (e.g., daily, weekly, monthly, *ad hoc*).

Reasonable Accommodation: An adjustment made to the requirements of the COVID-19 Vaccination Program for a Covered Individual who has received an approved Exception or Deferral to allow them to Physically Access a University Location or Program without impairing the health and safety objectives of this policy. Covered Individuals who are granted Exceptions or Deferrals will be required to observe Non-Pharmaceutical Interventions as a condition of Physical Presence.

Religious Objection: A Covered Individual's objection to receiving the COVID-19 vaccine based on that person's sincerely held religious belief, practice, or observance.

Responsible Office: The office at a Location responsible for processing requests for Exception or Deferral. The list of such offices can be found online at: [\[LINK\]](#)

Students: The term "Student" has the same meaning as defined in the current version of PACAOS 14.40: an individual for whom the University maintains student records and who: (i) is enrolled in or registered with an academic program of the University; (ii) has completed the immediately preceding term, is not presently enrolled, and is eligible for reenrollment; or (iii) is on an approved educational leave or other approved leave status,

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or is on filing-free status. For purposes of this policy, the term “Student” also includes K-12 students, children enrolled in day care programs, and campers who are eligible for vaccination outside clinical trials; as well as visiting students and extension students.

Trainees: Trainees include participants in post-graduate training programs who are neither Students nor Personnel; as well as individuals enrolled in continuing education, lifelong learning, seminars, workshops, and other non degree-granting educational programs.

University or UC: The University of California.

University Program: A program or activity operated by the University to support the University’s teaching or research mission and generally offered exclusively to University Personnel or Students. Examples of covered Programs that may not be conducted at a Location include the [UC Education Abroad Program](#) and University-sponsored athletics programs.

Vaccine: A COVID-19 Vaccine satisfies the requirements of this policy if: (i) the U.S. Food and Drug Administration (FDA) has issued a [License](#) or an [Emergency Use Authorization](#) (EUA) for the vaccine or; (ii) the World Health Organization has approved [Emergency Use Listing](#) (EUL).

Vaccine Information Statement (“VIS”): An information sheet produced by or including information derived from the Centers for Disease Control and Prevention, the California Department of Public Health, or UC Health or any of its components, explaining in plain language the benefits and risks of a COVID-19 vaccine to vaccine recipients. A VIS generally must be provided to an individual being vaccinated prior to each dose of the vaccine, in a language they understand. For purposes of this policy, a VIS may also include FDA fact sheets for vaccine recipients and caregivers.

III. POLICY TEXT

This policy supplements, and does not replace, policies or guidelines requiring University Personnel, Trainees, Students, patients, and visitors to observe Non-Pharmaceutical Interventions, as further described in [Appendix A: COVID-19 Prevention Strategies](#).

- A. [COVID-19 Vaccination Program](#). As a condition of Physical Presence at a Location or in a University Program, all Covered Individuals must Participate in the COVID-19 Vaccination Program by providing proof of Full Vaccination or submitting a request for Exception or Deferral no later than the Implementation Date. This requirement will be subject to implementation guidelines and any local procedures for enforcement. Alternative remote instructional programming is not expected to be available in most cases and the availability of alternative remote work arrangements will depend on systemwide guidance and any local policies or procedures, as well as the nature of the work to be performed.

1. [Access to Vaccination](#). All Locations that are campuses and medical centers must offer COVID-19 vaccination on-site or maintain a list of

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nearby and accessible off-site locations offering vaccination to Covered Individuals during working and non-working hours. This provision is not intended to restrict a Covered Individual's choice of provider, but to maximize their access to the Vaccine.

2. Proof of Vaccination. Covered Individuals must submit proof of their vaccination or of a University-approved Exception or Deferral to their Location Vaccine Authority, by providing: (i) in the case of one who has been Fully Vaccinated, a copy of their CDC vaccination card (or foreign equivalent in the case of Covered Individuals who received their vaccinations abroad); official documentation issued by a State vaccine registry; or an official medical record; or (ii) in the case of one who has received an Exception or Deferral, documentation that the Exception or Deferral has been granted. Proof of vaccination may be subject to audit.

Request for Exception/Deferral. A Covered Individual seeking an Exception or Deferral must, no later than the Implementation Date, submit their request to the appropriate Responsible Office. While a request is pending, the Covered Individual must, as a condition of Physical Presence, observe Non-Pharmaceutical Interventions defined by the LVA consistent with applicable public health directives and the guidelines in [Appendix A: COVID-19 Prevention Strategies](#). If an Exception or Deferral is granted, the issuing office must notify the Covered Individual and the LVA of the approval and the associated expiration date, if any. If a request for Exception or Deferral is denied, the Covered Individual will be notified and, thereafter, will be expected to promptly become Fully Vaccinated or denied Physical Presence at the relevant University Location(s) or Program(s).

3. Education. Any Covered Individual who has not provided proof of Full Vaccination by the Implementation Date will receive from the Location Vaccine Authority or designee information concerning:
 - a. The potential health consequences of COVID-19 illness for themselves, family members and other contacts, coworkers, patients, and the community;
 - b. Occupational exposure to SARS-CoV-2;
 - c. The epidemiology and modes of transmission, diagnosis, and non-vaccine infection control strategies (such as the use of appropriate precautions, personal protective equipment or face coverings, and respiratory hygiene/cough etiquette), in accordance with their level of responsibility in preventing COVID-19 infections;
 - d. The potential benefits of COVID-19 vaccination; and
 - e. The safety profile and risks of any COVID-19 vaccine.

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The information may be conveyed through any combination of written information statements, verbal communications, or online or in-person training programs, as required by the Location Vaccine Authority.

This educational requirement is not an alternative to required Participation in the COVID-19 Vaccination Program as a condition of Physical Presence at a University Location or Program as set forth above.

4. Registration Holds. Program implementation and enforcement with respect to Students will be handled consistent with the procedural provisions of the [Student Immunization Policy](#). Students who fail to provide proof of vaccination or apply for an Exception or Deferral by the Implementation Date may, therefore, be subject to a registration hold.
 5. Non-Pharmaceutical Interventions. All Covered Individuals must participate in Non-Pharmaceutical Interventions described in [Appendix A: COVID-19 Prevention Strategies](#), as implemented by the relevant University Location or Program. In the event of a COVID-19 outbreak, Covered Individuals and Covered Non-Affiliates who are not Fully Vaccinated may be excluded from the Location or site of the outbreak.
 6. Optional Additional Measures. Covered Individuals may wear masks or face coverings even if they are Fully Vaccinated.
- B. Covered Non-Affiliates. Each University Location and Program will define any requirements for public or other Covered Non-Affiliate Physical Presence (for example, at health facilities, entertainment venues, museums, libraries, workout facilities, or dining halls or food courts), consistent with applicable public health guidance.
- C. Superseding Public Health Directives. A federal, state, or local public health agency with jurisdiction may impose a COVID-19 vaccination requirement that lawfully supersedes this policy. In the event of a perceived conflict between public health requirements and this Policy, [UC Legal](#) should be consulted.
- D. Tracking and Reporting
1. Vaccination Data. The following information must be recorded and tracked by the Location Vaccine Authority or designee in the Covered Individual's confidential health record, consistent with University privacy and security policies including [BFB-IS-3](#) (Electronic Information Security Policy):
 - (i) date(s) of administration and vaccine type and manufacturer; or
 - (ii) documentation of a University-approved Exception or Deferral.

2. Vaccines Administered by the University

- a. Registries. For all vaccinations administered by the University in its capacity as healthcare provider, appropriate information will be submitted to the [California Immunization Registry](#) (CAIR) or such other registries as may be required by applicable public health agencies or University policy. While vaccine recipients ordinarily are permitted to opt out from registry reporting in California, the California Department of Public Health [has mandated](#) that all participating vaccinators report each dose of COVID-19 vaccine administered. Accordingly, the typical opt-out option does not apply.
 - b. Adverse Events. Any adverse events associated with COVID-19 vaccine administered at a Location and reported to the University must be tracked and logged by the LVA or designee and reported to federal and state public health officials using the [Vaccine Adverse Event Reporting System \(VAERS\)](#).
- E. Program Evaluation. Unless UCOP requires more regular reporting, Individual Healthcare Locations must, and other Locations may, evaluate Program Participation on an annual and ongoing basis, including evaluation of equity in Program implementation; as well as reasons identified for non-Participation or untimely Participation and the number and population-level characteristics of Covered Individuals who are not vaccinated.

IV. COMPLIANCE / RESPONSIBILITIES

- A. CDC and FDA generally translate VIS into many languages commonly spoken in California and elsewhere in the United States and post these online. Whenever the University is administering a vaccine in its capacity as healthcare provider, the relevant VIS should be provided to a person receiving vaccine in a language that they understand. In the unlikely event relevant VIS translations are unavailable, they should be accompanied when distributed with a document with [taglines such as those approved by the U.S. Department of Health & Human Services to facilitate language access by all affected Personnel, Trainees, and Students](#). Interpreters should also be made available in person, by video, or by phone during vaccine clinics.
- B. Each campus is responsible for: (i) assuring any necessary updates are made to its local Infectious Diseases/Infection Prevention and Control Programs; (ii) establishing deadlines for COVID-19 Vaccination Program Participation on an annual or ongoing basis, in consultation with epidemiology and infection prevention experts and occupational health representatives as applicable and consistent with any supply limitations; and (iii) assuring implementation of the COVID-19 Vaccination Program at all sites.

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1. Implementation includes informing Personnel, Trainees, and Students of the requirement and deadline for Program Participation, dates and Locations for on-site administration, and that vaccines will be provided at no cost to them if they wish to receive the vaccine from the University.
 2. Each campus should implement strategies for vaccine access, including efforts to ensure vaccination availability during all work shifts and to address vaccine hesitancy, particularly among groups at most significant risk for contracting COVID-19 and suffering severe illness.
- C. Chancellors, Laboratory Directors, and the Vice President ANR are responsible for implementing this policy. Deans, Department Chairs, unit heads, managers, supervisors, student affairs leaders, and others with responsibility for personnel management will support Program implementation and enforcement. Consultation with Academic Senate leaders, especially on the campus, is encouraged with respect to implementation procedures for academic appointees.

V. PROCEDURES

A systemwide implementation working group will develop implementation guidelines for this policy, which will subsequently be attached to the policy. Each Location may establish local procedures consistent with those guidelines to facilitate implementation of the policy.

VI. RELATED INFORMATION

- [Advisory Committee on Immunization Practices – *Ethical Principles for Allocating Initial Supplies of COVID-19 Vaccine – United States, 2020* \(MMWR Nov. 23, 2020\) and *Meeting Information* \(November 23 and December 1, 2020\)](#)
- [American College Health Association Recommends COVID-19 Vaccination Requirements for All On-Campus College Students in Fall 2021](#)
- [American College of Obstetricians and Gynecologists, COVID-19 Vaccination Recommendations for Obstetric-Gynecologic Care \(December 2020\)](#)
- [UC Health Coordinating Committee – Bioethics Working Group Vaccine Allocation Recommendations](#)
- [Cal. Health & Safety Code Division 2, Chapter 2, Article 3.5](#)
- California Department of Public Health, [Licensees Authorized to Administer Vaccine in California](#)
- [Centers for Disease Control and Prevention, COVID-19 Contraindications and Precautions](#)
- [Centers for Disease Control and Prevention, COVID-19 Vaccine Training: General Overview of Immunization Best Practices for Healthcare Providers](#)
- [FDA COVID-19 Vaccine Information](#)
- FDA AstraZeneca COVID-19 Vaccine (includes fact sheet and translations) [COMING SOON]

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- [FDA Janssen COVID-19 Vaccine](#) (includes fact sheet and translations)
- [FDA Pfizer-BioNTech COVID-19 Vaccine](#) (includes fact sheet and translations)
- [FDA Moderna COVID-19 Vaccine](#) (includes fact sheet and translations)
- [CDC COVID-19 Vaccination](#)
- [CDC COVID Vaccination Program Planning Guidance](#)
- [CDC Vaccine Recommendation Process](#)
- [American Medical Association, Opinion 8.7, Routine Universal Immunization of Physicians](#) and KB O'Reilly, [Are Physicians Obligated to Get Vaccinated Against COVID-19?](#) (November 16, 2020)
- [Infectious Disease Society of America – COVID-19 Vaccine Information](#)
- [Congregation for the Doctrine of the Faith, Note on the Morality of Using Some Anti-COVID-19 Vaccines](#) (December 21, 2020)
- List of Responsible Offices [COMING SOON]

VII. FREQUENTLY ASKED QUESTIONS

1. *What is the relationship between this policy and the previously posted interim policy?* This policy replaces the previously posted interim policy in its entirety.
2. *The policy both encourages and requires members of the University Community to be vaccinated. Which is it?* The policy strongly *encourages* all members of the University Community to be vaccinated. Only Covered Individuals are *required* to Participate in the Program by becoming Fully Vaccinated or receiving a University-approved Exception or Deferral.
3. *Why is UC allowing exceptions for reasons other than medical exemption? If California can eliminate personal belief and religious exceptions for K-12 students, why can't UC do the same?* The University is required by law to offer reasonable accommodations to individuals who qualify for an Exception to the vaccination requirement based on their disability, as well as to employees who object to vaccination based on their sincerely-held religious belief, practice, or observance. A decision was made to apply the COVID-19 vaccine mandate consistently across all groups of individuals covered by this policy. Vaccination against the virus that causes COVID-19 is a critical step for protecting the health and safety of our communities and ending the pandemic.
4. *Is this a one-time mandate or will I be required to get boosters or annual shots?* This is a permanent policy. Infectious disease experts anticipate that annual or more frequent boosters will be necessary and receipt of boosters will be required, consistent with product labeling, in the same way that the initial vaccination is required by this policy and subject to the same Exceptions and Deferrals.
5. *Am I required to be vaccinated to attend school?* Covered Individuals must receive the COVID-19 vaccine as a condition to Physical Presence at Locations

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and in University Programs, unless they have been granted an Exception or Deferral.

6. *Will this requirement apply to union-represented employees?* Yes, in accordance with any applicable collective bargaining requirements.
7. *How do I apply for an Exception or Deferral?* Individuals covered by this policy who seek an exception (on medical, disability, or religious grounds) or deferral (during pregnancy) must complete the request form and submit it to their location's Responsible Office. Model forms have been published with this final policy for adaptation or as-is use by each location. Employees should use the forms adopted by their location. Details will be communicated by each UC Location to Covered Individuals.
8. *I am pregnant. Will I be eligible for a medical exemption?* No, but you are eligible for a Deferral throughout your pregnancy or (if later) when you return to work or instruction, as applicable. You may also be eligible for a disability accommodation. According to the Centers for Disease Control and Prevention (CDC), pregnant people and recently pregnant people are at increased risk for severe illness from COVID-19 when compared with non-pregnant people. Severe illness includes illness that requires hospitalization, intensive care, or a ventilator or special equipment to breathe, or illness that results in death. Additionally, pregnant people with COVID-19 are at increased risk of preterm birth and might be at increased risk of other adverse pregnancy outcomes compared with pregnant people without COVID-19. There is currently *no evidence* that any vaccines, including COVID-19 vaccines, cause female or male fertility problems. Accordingly, the University strongly recommends that all Students, Trainees, and Personnel be vaccinated unless they have Contraindications or Precautions. However if you are pregnant, you will be eligible for Deferral through the end of the pregnancy or (if later) when you return to work or instruction, as applicable.
9. *I was recently diagnosed with COVID-19, and/or I had an antibody test that shows that I have natural immunity. Does this support a Medical Exemption?* You may be eligible for a temporary Medical Exemption (and, therefore, a temporary Exception), for up to 90 days after your diagnosis and certain treatments. [According to the US Food and Drug Administration](#), however, “a positive result from an antibody test does not mean you have a specific amount of immunity or protection from SARS-CoV-2 infection ... Currently authorized SARS-CoV-2 antibody tests are not validated to evaluate specific immunity or protection from SARS-CoV-2 infection.” For this reason, individuals who have been diagnosed with COVID-19 or had an antibody test are not permanently exempt from vaccination.
10. *I am participating or have participated in a vaccine clinical trial for a vaccine that has not been approved, and so I have not received a CDC card. Am I considered to be in compliance with the policy?* The University will accept any FDA- or

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WHO-authorized vaccine as fulfilling the mandate. If you participated in a trial of a vaccine that has received authorization from *either* body, and you can show that you did not receive the placebo (that is, your record has been “unblinded”), then you will be considered in compliance with the policy. Boosters may later be required as explained above.

11. *How will I know if my co-workers or fellow Students are going unvaccinated?* You probably won't know. Because vaccination-related information is private and confidential, the University will not disclose vaccine status of Covered Individuals except on a need-to-know basis; however third parties and some Locations may distribute badge attachments, stickers, pins, or other indicators that vaccinated individuals may use to show that they have received the vaccine.
12. *I teach both seminar and lecture classes, and as a result am typically exposed to many students. Will I be informed if someone in my class is not vaccinated? If not, will all students be required to wear masks?* As will be the case in any public setting, you will not be informed of the vaccination status of individual students and should expect that some may not be vaccinated due to pending or granted Exceptions or Deferrals. Guidance on face coverings for individuals who have and have not been Fully Vaccinated is provided in [Appendix A: COVID-19 Prevention Strategies](#).
13. *Will University of California Health specify which authorized or licensed vaccine is preferred?* No. Any COVID-19 vaccine authorized or approved by the U.S. Food and Drug Administration or by the World Health Organization will be accepted to satisfy the vaccination requirement.
14. *Will Locations provide paid time off for non-exempt employees for the time needed to get vaccinated?* Yes. Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of the SARS-CoV-2 (COVID-19) vaccine. These employees and academic appointees must provide advance notice to their supervisor. If an employee or academic appointee needs more time for this purpose before September 30, 2021, the employee or academic appointee may request 2021 Emergency Paid Sick Leave (EPSL) (Reason 3(d)) for the additional time.
15. *What if I experience flu-like symptoms as a result of the vaccine that mean I cannot work as scheduled, or attend classes?* Employees should contact their supervisors or local human resources offices for instruction but as a general matter, accrued sick leave, vacation, and/or PTO may be used to take time off as needed to recover. Before September 30, 2021, employees may also request EPSL (Reason 3(e)) for that purpose. Students should contact their faculty/instructors regarding minor illnesses or disability services to address any significant issues.

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16. *If I have applied for or been granted an Exception or Deferral, what Non-Pharmaceutical Interventions (NPIs) will I be required to observe?* See [Appendix A: COVID-19 Prevention Strategies](#), which describes required NPIs. Additional safety measures may be deemed necessary, depending on the circumstances, by local public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. In that case, a person who has received an approved Exception or Deferral (or whose request is pending) will be informed of any additional requirements.
17. *Who will pay for the vaccine?* Initial supplies have been paid for by the federal government. Vaccines administered by the University to consenting Covered Individuals as part of the COVID-19 Vaccination Program (e.g., during vaccine clinics or at employee health or occupational health offices) are administered free of charge. In addition, all of the University's health plans cover CDC-recommended vaccines administered by an employee's primary care physician or at a local pharmacy.
18. *How will enforcement work for failure to participate in the program?* Efforts will be made to encourage Participation in the COVID-19 Vaccination Program prior to the Implementation Date. Those Covered Individuals who fail to Participate by being Vaccinated or requesting an Exception or Deferral on or before the Implementation Date will be barred from Physical Presence at University Facilities and Programs, and may experience consequences as a result of non-Participation, up to and including dismissal from educational programs or employment.
19. *I am at high risk for severe illness if I contract COVID-19 (e.g., immunocompromised) and even though I have been vaccinated, I know that no vaccine is 100% effective. Do I have to come to work if my co-workers or Students are not all vaccinated? What accommodations will be made for me?* Please contact your local disability services office to discuss your situation and possible accommodations.
20. *Will the University accept internationally approved vaccines even if not authorized or approved in the United States?* Yes, if the vaccine is authorized by the [World Health Organization](#) (WHO). The WHO [has developed a process](#) for assessing and listing unlicensed vaccines, therapeutics, and diagnostics during public health emergencies. Through that process, a number of vaccines not available in the United States have received Emergency Use Listing (EUL). A document summarizing the status of a wide range of international vaccines can be found [online on the WHO's website](#) (click on link to status of COVID-19 vaccines in the EUL/PQ evaluation process). The University will, consistent with [CDC](#) and CDPH guidance, accept proof of Full Vaccination with any international vaccine that has been authorized for emergency use by WHO through the EUL process. People who have completed a COVID-19 vaccination series with one of these vaccines *do not need* additional doses with an FDA-licensed or -authorized

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COVID-19 vaccine, at least initially (but may be subject to subsequent booster requirements). Those who are not Fully Vaccinated generally will be required to receive an FDA-licensed or -authorized Vaccine no less than 28 days after their last international vaccination (but may consult with the LVA or designee to discuss eligibility for a temporary Medical Exemption). In the interim, they will be treated as if they are not Fully Vaccinated.

21. *I was vaccinated in another country, where the government increased the time between first and second vaccines to longer than the CDC and FDA advise. Do I have to be revaccinated?* No. If you have proof of completing a series of any FDA-licensed or FDA- or WHO-authorized vaccine consistent with your country's implementation, you will be considered to have been Fully Vaccinated.
22. *I cannot come back to campus 3-4 weeks before school starts, and I can't access any vaccine in my country. Will I be allowed on campus?* Yes. You will be allowed on campus but will be referred to a vaccine site to get vaccinated immediately, unless you qualify for a University-approved Exception or Deferral. Until you are Fully Vaccinated, you will be subject to the NPIs described in [Appendix A: COVID-19 Prevention Strategies](#) for unvaccinated individuals. Additional safety measures may be deemed necessary, depending on the circumstances, by local public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority.

VIII. REVISION HISTORY

First Effective Date: December 14, 2020

Amended: January 15, 2021 (extended from UC Health to all University locations)

Amended: July 15, 2021 (extended to Students, effective Fall 2021; and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals)

This Policy is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.

IX. APPENDICES

- A. [COVID-19 Prevention Strategies](#)
- B. [Vaccine Information Statements](#) [COMING SOON]
 - a. FDA EUA Fact Sheet for Recipients and Caregivers (AstraZeneca) [COMING SOON]
 - b. [FDA EUA Fact Sheet for Recipients and Caregivers](#) (Janssen)
 - c. [FDA EUA Fact Sheet for Recipients and Caregivers](#) (Pfizer-BioNTech)
 - d. [FDA EUA Fact Sheet for Recipients and Caregivers](#) (Moderna)
- C. Model Acknowledgement Form (Vaccine Administration)
- D. Exceptions and Deferrals
 - a. Medical Exemption and/or Disability Exception Request Form

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- b. Religious Exception Request Form
- c. Deferral Request Form
- d. Approval of Request for Exception or Deferral Form
- e. Denial of Request for Exception or Deferral Form

Note: The model forms are provided for convenience only and may be adapted by locations consistent with applicable policies and practices.

UNIVERSITY OF CALIFORNIA
MEDICAL EXEMPTION AND/OR DISABILITY EXCEPTION REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement

EMPLOYEE OR STUDENT NAME	EMPLOYEE OR STUDENT ID
JOB TITLE (IF APPLICABLE)	LOCATION
DEPARTMENT	SUPERVISOR (IF APPLICABLE)
PHONE NUMBER	EMAIL

This form should be used by University employees and students to request an Exception to the COVID-19 vaccination requirement in the University's [SARS-CoV-2 Vaccination Program Policy](#) based on (a) Medical Exemption due to a Contraindication or Precaution to COVID-19 vaccination [recognized by the U.S. Centers for Disease Control and Prevention \(CDC\)](#) or by the vaccines' manufacturers or (b) Disability.

Fill out Part A to request an Exception based on Medical Exemption. Fill out Part B to request an Exception based on Disability. Both sections may be completed if both apply to you. Important: Do not identify any diagnosis, disability, or other medical information. That information is not required to process your request.

Part A: Request for Exception Based on Medical Exemption

- ☐ The Contraindications or Precautions to COVID-19 vaccination recognized by the CDC or by the vaccines' manufacturers apply to me with respect to all available COVID-19 vaccines. For that reason, I am requesting an Exception to the COVID-19 vaccination requirement based on Medical Exemption. My request is supported by the attached certification from my health care provider. ***I understand that some local (city/county) public health departments have issued orders specifying that the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.***

Part B: Request for Exception Based on Disability

- ☐ I have a Disability and am requesting an Exception to the COVID-19 vaccination requirement as a Disability accommodation. My request is supported by the attached certification from my health care provider. ***I understand that some local (city/county) public health departments have issued orders specifying that the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.***

* * * FORM CONTINUES ON NEXT PAGE * * *

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MEDICAL EXEMPTION AND/OR DISABILITY EXCEPTION REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement

Please provide any additional information that you think may be helpful in processing your request. ***Again, do not identify your diagnosis, disability, or other medical information.***

While my request is pending, I understand that I must comply with the Non-Pharmaceutical Interventions (e.g., face coverings, regular asymptomatic testing) for unvaccinated or not fully vaccinated individuals as a condition of my Physical Presence at any University Location/Facility or Program. These required Non-Pharmaceutical Interventions are defined by my Location's public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my circumstances or position, as required by my Location. If my request is granted, I understand that I will be required to comply with Non-Pharmaceutical Interventions specified by my Location as a condition of my Physical Presence at any University Location/Facility or Program.

I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: _____ Date: _____

Date Received by University: _____ By: _____

UNIVERSITY OF CALIFORNIA
MEDICAL EXEMPTION AND/OR DISABILITY EXCEPTION REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement

CERTIFICATION FROM HEALTH CARE PROVIDER

The University of California requires that its employees and students be vaccinated against COVID-19 infection as a condition of accessing any University location, facility, or program in person. The University may grant Exceptions to this requirement based on (a) Medical Exemption due to a Contraindication or Precaution to COVID-19 vaccination recognized by the U.S. Centers for Disease Control and Prevention (CDC) or by the vaccine's manufacturer or (b) Disability, provided that the individual's request for such an Exception is supported by a certification from their qualified licensed health care provider.

HEALTH CARE PROVIDER NAME	LICENSE TYPE, # AND ISSUING STATE
FULL NAME OF PATIENT	DATE OF BIRTH OF PATIENT
PATIENT'S EMPLOYEE/STUDENT/TRAINEE ID NUMBER	HEALTH CARE PROVIDER PHONE/EMAIL
PHYSICIAN SUPERVISOR AND LICENSE # (FOR A PHYSICIAN ASSISTANT WORKING UNDER A PHYSICIAN'S LICENSE)	

Please note the following from the Genetic Information Nondiscrimination Act of 2008 (GINA), which applies to all University employees:

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. "Genetic information," as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

Please complete Part A of this form if one or more of the Contraindications or Precautions to COVID-19 vaccination recognized by the CDC or the vaccines' manufacturers apply to this patient. Please complete Part B if this patient has a Disability, as defined below, that makes COVID-19 vaccination inadvisable in your professional opinion. Both sections may be completed if both apply to this patient. Important: Do not identify the patient's diagnosis, disability, or other medical information as this document will be returned to the University.

UNIVERSITY OF CALIFORNIA
MEDICAL EXEMPTION AND/OR DISABILITY EXCEPTION REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement

Part A: Contraindication or Precaution to COVID-19 Vaccination

- ☐ I certify that one or more of the Contraindications or Precautions recognized by the CDC or by the vaccines' manufacturers for each of the currently available COVID-19 vaccines applies to the patient listed above. For that reason, COVID-19 vaccination using any of the currently available COVID-19 vaccines is inadvisable for this patient in my professional opinion. The Contraindication(s) and/or Precaution(s) is/are:
☐ Permanent ☐ Temporary.

If temporary, the expected end date is: _____.

Part B: Disability That Makes COVID-19 Vaccination Inadvisable

"Disability" is defined as a physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. "Disability" includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.

- ☐ I certify that the patient listed above has a Disability, as defined above, that makes COVID-19 vaccination inadvisable in my professional opinion. The patient's disability is: ☐ Permanent ☐ Temporary.

If temporary, the expected end date is: _____.

Signature of Health Care Provider

Date

UNIVERSITY OF CALIFORNIA
RELIGIOUS EXCEPTION REQUEST FORM
Accommodation to SARS-CoV-2 (COVID-19) Vaccination Requirement

EMPLOYEE OR STUDENT NAME	EMPLOYEE OR STUDENT ID
JOB TITLE (IF APPLICABLE)	LOCATION
DEPARTMENT (IF APPLICABLE)	SUPERVISOR (IF APPLICABLE)
PHONE NUMBER	EMAIL

Based on my sincerely held religious belief, practice, or observance, I am requesting an Exception to the COVID-19 vaccination requirement in the University's [SARS-CoV-2 Vaccination Program Policy](#) as a religious accommodation.

Please identify your sincerely held religious belief, practice, or observance that is the basis for your request for an Exception as a religious accommodation.

Please briefly explain how your sincerely held religious belief, practice, or observance conflicts with the University's COVID-19 vaccination requirement.

Please provide any additional information that you think may be helpful in processing your religious accommodation request.

While my request is pending, I understand that I must comply with the Non-Pharmaceutical Interventions (e.g., face coverings, regular asymptomatic testing) for unvaccinated or not fully vaccinated individuals as a condition of my Physical Presence at any University Location/Facility or Program. These required Non-Pharmaceutical Interventions are defined by my Location's public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my circumstances or position, as required by my Location. If my request is granted, I understand that I will be required to comply with Non-Pharmaceutical Interventions specified by my Location as a condition of my Physical Presence at any University Location/Facility or Program.

I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: _____ Date: _____

Date Received by University: _____ By: _____

UNIVERSITY OF CALIFORNIA
DEFERRAL REQUEST FORM
Deferral of SARS-CoV-2 (COVID-19) Vaccination Requirement

EMPLOYEE/STUDENT NAME	EMPLOYEE/STUDENT ID
JOB TITLE (IF APPLICABLE)	LOCATION
DEPARTMENT (IF APPLICABLE)	SUPERVISOR (IF APPLICABLE)
PHONE NUMBER	EMAIL

This form should be used by University employees and students to request a Deferral of the COVID-19 vaccination requirement in the University's [SARS-CoV-2 Vaccination Program Policy](#) during pregnancy.

☐ I am currently pregnant and am requesting a Deferral of the COVID-19 vaccination requirement during my pregnancy. My anticipated due date is: _____.

While my request is pending, I understand that I must comply with the Non-Pharmaceutical Interventions (e.g., face coverings, regular asymptomatic testing) for unvaccinated or not fully vaccinated individuals as a condition of my Physical Presence at any University Location/Facility or Program. These required Non-Pharmaceutical Interventions are defined by my Location's public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my circumstances or position, as required by my Location. If my request is granted, I understand that I will be required to comply with Non-Pharmaceutical Interventions specified by my Location as a condition of my Physical Presence at any University Location/Facility or Program.

I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: _____ Date: _____

Date Received by University: _____ By: _____

UNIVERSITY OF CALIFORNIA
APPROVAL OF REQUEST FOR EXCEPTION OR DEFERRAL
SARS-CoV-2 (COVID-19) Vaccination Requirement

TO:	EMPLOYEE/STUDENT NAME	EMPLOYEE/STUDENT ID
FROM:	ISSUING OFFICE	ISSUING OFFICE PHONE/EMAIL
	ISSUING AUTHORITY NAME	ISSUING AUTHORITY TITLE
CC:	LOCATION VACCINE AUTHORITY NAME/EMAIL	

On _____, we received your request for the following in connection with the COVID-19 vaccination requirement in the University's [SARS-CoV-2 Vaccination Program Policy](#):

- ☐ Exception based on Medical Exemption (Contraindication or Precaution)
- ☐ Exception based on Disability
- ☐ Exception based on Religious Objection
- ☐ Deferral based on pregnancy

For Exceptions: Based on the information you have provided, your request for Exception has been **APPROVED** subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid ☐ until _____ ☐ indefinitely. If your approval has an end date and you no longer need an Exception or Deferral at that time, you will have until _____ (eight [8] weeks after the end date) to become Fully Vaccinated and submit proof of vaccination.

For Deferrals: Based on the information you have provided, your request for Deferral has been **APPROVED** subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid until you return to work or instruction, as applicable. If you no longer need an Exception or Deferral at that time, you must become Fully Vaccinated and submit proof of vaccination within eight (8) weeks of your return.

You must comply with the Non-Pharmaceutical Interventions (e.g., face coverings, regular asymptomatic testing) for unvaccinated or not fully vaccinated individuals as a condition of your Physical Presence at any University Location/Facility or Program. These required Non-Pharmaceutical Interventions are defined by your Location's public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. You must also comply with the following Non-Pharmaceutical Interventions applicable to your position (if any):

If you have any questions or concerns regarding the above, please contact:

BY SIGNING BELOW, YOU CERTIFY THAT YOU HAVE BEEN INFORMED OF THE RISKS OF COVID-19 INFECTION, INCLUDING LONG-TERM DISABILITY AND DEATH, BOTH FOR YOU AND FOR OTHERS WHO YOU MAY EXPOSE TO THE DISEASE.

Approved by: _____ Date: _____
 (Signature of Issuer)

Accepted: _____ Date: _____
 (Signature of Employee/Student)

UNIVERSITY OF CALIFORNIA
DENIAL OF REQUEST FOR EXCEPTION OR DEFERRAL
SARS-CoV-2 (COVID-19) Vaccination Requirement

TO:	EMPLOYEE/STUDENT NAME/EMAIL	EMPLOYEE/STUDENT ID
FROM:	ISSUING OFFICE	ISSUING OFFICE PHONE/EMAIL
	ISSUING AUTHORITY NAME	ISSUING AUTHORITY TITLE
CC:	LOCATION VACCINE AUTHORITY NAME/EMAIL	

On _____, we received your request for the following in connection with the COVID-19 vaccination requirement in the University's [SARS-CoV-2 Vaccination Program Policy](#):

- ☐ Exception based on Medical Exemption (Contraindication or Precaution)
- ☐ Exception based on Disability
- ☐ Exception based on Religious Objection
- ☐ Deferral based on pregnancy

Your request has been **DENIED** based on the information we have received to date.

The reason for the denial is the following:

- ☐ You do not qualify for the Exception/Deferral that you requested.
- ☐ Your request is incomplete. We have requested the following additional information from you but have not received it.
- ☐ You are not a Covered Individual as defined by the SARS-CoV-2 Vaccination Program Policy. This means that you are not required to be vaccinated against COVID-19 at this time, so you do not need an Exception or Deferral to the University's COVID-19 vaccination requirement. If you later become a Covered Individual and wish to request an Exception or Deferral at that time, you will need to submit a new request.

Because your request for an Exception/Deferral has been denied, **you have until _____ (eight [8] weeks from the date below) to become Fully Vaccinated.** If you do not provide proof of Full Vaccination as required by the SARS-CoV-2 Vaccination Program Policy by that deadline, you will be barred from Physical Presence at University Locations/Facilities and Programs.

Until you are Fully Vaccinated, you must comply with the Non-Pharmaceutical Interventions (e.g., face coverings, regular asymptomatic testing) for unvaccinated or not fully vaccinated individuals as a condition of your Physical Presence at any University Location/Facility or Program. These required Non-Pharmaceutical Interventions are defined by your Location's public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. You must also comply with the following Non-Pharmaceutical Interventions applicable to your position (if any):

If you have any questions regarding the above, please contact:

Denied by: _____ Date: _____
(Signature of Issuer)