MEMORANDUM FOR SENIOR PENTAGON LEADERSHIP
COMMANDERS OF THE COMBATANT COMMANDS
DEFENSE AGENCY AND DOD FIELD ACTIVITY DIRECTORS


This memorandum rescinds and replaces reference (a),1 and provides updated guidance for implementing additional force health protection and workplace safety measures directed by the White House Safer Federal Workforce Task Force (reference (b)) to reduce the transmission of the virus that causes coronavirus disease 2019 (COVID-19).

In accordance with references (b), (c), and (d), DoD civilian employees were required to be fully vaccinated by November 22, 2021, subject to exemptions as required by law. For purposes of this guidance, “DoD civilian employee” includes foreign nationals employed by DoD outside the United States to the maximum extent possible while respecting host nation agreements and laws. It also includes DoD civilian employees who are engaged in full-time telework or remote work. Additional information about the requirements for DoD civilian employees can be found in Attachment 1.

DoD contractor personnel and official visitors must attest to being fully vaccinated and, if not fully vaccinated, present the results of a recent negative COVID-19 test as a condition of physical access to DoD buildings and DoD-leased spaces in non-DoD buildings in which official DoD business takes place (referred to jointly in this memorandum as “DoD facilities”). For purposes of this physical access requirement, “contractor personnel” are those individuals issued a credential by DoD that affords the individual recurring access to DoD facilities, classified herein as “credentialed recurring access” (CRA) (e.g., Common Access Cardholders). “Official visitors” are non-DoD individuals seeking access, one time or recurring, in association with the performance of official DoD business (e.g., to attend a meeting), but who do not have CRA. The COVID-19 vaccination status for all individuals with CRA and official visitors will be determined in accordance with Attachment 2.

These vaccination and physical access requirements do not apply to personnel receiving ad hoc access to DoD facilities (e.g., delivery personnel, taxi services); to individuals who have access to the grounds of, but not the buildings on, DoD installations (e.g., contract groundskeepers, fuel delivery personnel, household goods transportation personnel); to personnel accessing DoD buildings unrelated to the performance of DoD business (e.g., residential housing); or to personnel accessing DoD facilities to receive a public benefit (e.g., commissary;

1 References are listed in Attachment 10.
exchange; public museum; air show; military medical treatment facility; Morale, Welfare, and Recreation resources).

In accordance with reference (e), Service members (members of the Armed Forces under DoD authority on active duty or in the Ready Reserve, including members of the National Guard) are required to be fully vaccinated against COVID-19. Service members' vaccination status will be validated utilizing their Military Service-specific Individual Medical Readiness (IMR) system. If a Service member has been vaccinated against COVID-19 outside the Military Health System, that Service member must show official proof of his or her COVID-19 vaccination status to update the IMR system. Once the applicable mandatory vaccination date has passed, COVID-19 screening testing as described in Attachment 7 is required at least weekly for Service members entering a DoD facility who are not fully vaccinated, including those who have an exemption request under review, or who are exempted from COVID-19 vaccination. Service members who are not on active duty and who also are DoD civilian employees or DoD contractor personnel must follow the applicable requirements in this memorandum for DoD civilian employees or DoD contractor personnel, as the case may be. Service members not on active duty must comply with any other applicable DoD or DoD Component guidance. Service members who are actively participating in COVID-19 vaccine clinical trials began prior to November 22, 2021 are exempted from mandatory vaccination against COVID-19 until the trial is complete in order to avoid invalidating such clinical trial results.

Individuals are considered fully vaccinated 2 weeks after completing the second dose of a two-dose COVID-19 vaccine or 2 weeks after receiving a single dose of a one-dose COVID-19 vaccine. Individuals must be vaccinated with vaccines that are either fully licensed or authorized for emergency use by the Food and Drug Administration (FDA) (e.g., Pfizer-BioNTech/COMIRNATY, Moderna, Johnson & Johnson/Janssen vaccines); listed for emergency use on the World Health Organization Emergency Use Listing (e.g., AstraZeneca/Oxford); or approved for use in a clinical vaccine trial for which vaccine efficacy has been independently confirmed (e.g., Novavax). Those with previous COVID-19 infection(s) or antibody test results are not considered fully vaccinated on that basis for the purposes of this memorandum.

All medical and other information collected from individuals will be maintained in a manner meeting the privacy requirements in Attachment 9.

The Secretaries of Military Departments and the Director of Administration and Management for all other DoD Components will publish any necessary supplemental instructions and ensure that all contract and associated funding implications are considered.

DoD Components should engage with DoD civilian employee unions as they develop supplemental guidance and otherwise satisfy any applicable collective bargaining obligations under the law at the earliest convenience, including on a post-implementation basis.

This memorandum and other COVID-19 guidance memoranda are centrally located at: https://www.defense.gov/Spotlights/Coronavirus-DOD-Response/Latest-DOD-Guidance/.
Please direct any questions or comments to the following email address: dha.ncr.ha-support.list.policy-hrpo-kmc-owners@mail.mil.

Gilbert R. Cisneros, Jr.

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4. ATTACHMENT 4: DD Form 3150 – “Contractor and Visitor Certification of Vaccination”
5. ATTACHMENT 5: DD Form 3176 – “Request for a Medical Exemption or Delay to the COVID-19 Vaccination Requirement”
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ATTACHMENT 1
Vaccination Requirements for DoD Civilian Employees

1. Vaccination Requirement

a. DoD civilian employees are required to be fully vaccinated, unless they have received a temporary or permanent exemption. DoD civilian employees who are actively participating in COVID-19 vaccine clinical trials begun prior to November 22, 2021, are exempted from mandatory vaccination against COVID-19 until the trial is complete in order to avoid invalidating such clinical trial results.

b. DoD civilian employees who are not fully vaccinated must comply with all DoD requirements for individuals who are not fully vaccinated, including those requirements related to masking, physical distancing, and travel. Weekly COVID-19 testing is required for those DoD civilian employees who are not fully vaccinated, including those who have medical or religious exemptions. DoD civilian employees who telework or work remotely on a full-time basis are not subject to weekly testing, but must provide a negative result from a test performed within the prior 72 hours for entry into a DoD facility.

c. DoD civilian employees are eligible to receive the COVID-19 vaccine at any DoD vaccination site, including military medical treatment facilities. They may also opt to receive the COVID-19 vaccine at locations other than DoD vaccination sites, such as retail stores, private medical practices, and/or local and State public health department sites.

d. New DoD civilian employees must be fully vaccinated by their entry on duty (start) date.

i. The DoD or Office of the Secretary of Defense (OSD) Component head concerned may approve temporary exemptions in writing for up to 60 days after a DoD civilian employee’s start date for urgent, mission-critical hiring needs in circumstances in which a DoD civilian employee could not have been fully vaccinated between the time the job opportunity announcement closes and the DoD civilian employee’s start date. This authority may be delegated in writing to the DoD or OSD Component head’s Principal Deputy (or equivalent) but no lower.

ii. DoD Components must address the COVID-19 vaccination requirement in job opportunity announcements and tentative and final offer letters. For hiring actions currently underway, DoD Components must issue revised tentative and final offer letters. Sample language can be found in reference (f).

e. DoD civilian employees are authorized official duty time to receive vaccination doses. For DoD civilian employees who are unable to receive a COVID-19 vaccination within their duty hours, regular overtime rules are applicable.
f. DoD civilian employees are authorized administrative leave for purposes of taking a family member to get a vaccination and for themselves to recover from vaccination. DoD civilian employees who experience an adverse reaction to a COVID-19 vaccination should be granted no more than two workdays of administrative leave for recovery associated with a single COVID-19 vaccination dose. DoD civilian employees should use the time and attendance code for “physical fitness” to record administrative leave for COVID-19 vaccination recovery time that prevents the employee from working or for taking a family member to be vaccinated for COVID-19. The type hour code is “LN” and the environment/hazard/other code is “PF”. Non-appropriated fund employers should code administrative leave related to COVID-19 in a way that can be easily reported.

2. Verification of Vaccination

a. DoD civilian employees who have received a dose of a one-dose vaccine, or both doses of a two-dose vaccine, must provide proof of vaccination to their direct supervisor. For purposes of the vaccination data submission and verification requirements, “direct supervisor” includes an authorized human resources official.

b. Proof of vaccination may be submitted either in hard copy or in an electronic format. The proof may be a photocopy or photograph of the vaccination record, if it legibly displays the data points to be verified by the supervisor. DoD civilian employees who are not fully vaccinated must provide proof of vaccination to their supervisor upon receipt of each required dose. Acceptable proof includes:

i. A copy of the record of immunization from a health care provider or pharmacy;
ii. A copy of the COVID-19 Vaccination Record Card (CDC Form MLS-319813_r, published on September 3, 2020);
iii. A copy of medical records documenting the vaccination;
iv. A copy of immunization records from a public health or State immunization information system; or
v. A copy of any other official documentation containing the data points required to be verified by the supervisor.

c. In addition to providing proof of vaccination to their supervisors, DoD civilian employees also will complete Section A of DD Form 3175 (Attachment 3). DoD civilian employees with access to milConnect [https://milconnect.dmdc.osd.mil/] will complete the DD Form 3175 via milConnect; otherwise use of a hard copy is acceptable. DoD civilian employees who complete the DD Form 3175 via milConnect do not need to email or otherwise transmit a copy of the form to their supervisors. DoD civilian employees using a hard copy will provide the hard copy to their supervisor. DoD civilian employees are required to complete the DD Form 3175 even if they already completed the DD Form 3150 (Attachment 4).

2 [https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd3175.pdf]
d. Upon receiving proof of vaccination, a DoD civilian employee’s supervisor will verify that the proof of vaccination provided contains the following data points:

i. Type of vaccine administered;

ii. Number of doses received;

iii. Date(s) of administration; and

iv. Name of the health care professional(s) or clinic site(s) administering the vaccine(s).

e. In addition to verifying that a DoD civilian employee’s proof of vaccination includes the required data points, supervisors also will complete Section B of DD Form 3175. Supervisors with access to milConnect (https://milconnect.dmdc.osd.mil/) will complete the DD Form 3175 via milConnect using the DoD civilian employee’s Employee Identification Number; otherwise use of a hard copy is acceptable.

f. Supervisors will retain DoD civilian employees’ proof of vaccination and DD Form 3175 (for those DoD civilian employees not using milConnect) in accordance with their DoD Component’s recordkeeping requirements for DoD civilian employee medical records and the privacy requirements contained in Attachment 9. Supervisors should not ask for copies of the DD Form 3175 from those employees who used milConnect to complete the form. Supervisors who receive completed copies of the DD Form 3175 from DoD civilian employees who completed the DD Form 3175 using milConnect shall destroy the copy or return it to the employee.

g. DoD civilian employees may not be required to use their own personal equipment for the purpose of submitting proof of vaccination or DD Form 3175. DoD civilian employees who submit proof of vaccination or the DD Form 3175 in an electronic format are encouraged to use encrypted email or password protected files with DoD SAFE file transfer (https://safe.apps.mil/).

3. Enforcement of DoD Civilian Employee COVID-19 Vaccination Requirement:

a. DoD civilian employees who refuse to be vaccinated, or to provide proof of vaccination, are subject to disciplinary measures, up to and including removal from Federal service, unless the DoD civilian employee has received an exemption or the DoD civilian employee’s request for an exemption is pending a decision. DoD Components should generally follow the recommended guidelines in reference (g), subject to any applicable Component policy and collective bargaining agreements.

b. Progressive enforcement actions include, but are not limited, to:

i. A 5 calendar-day period of counseling and education;

ii. A short suspension without pay, generally 14 calendar days or less, with an appropriate notice period. Senior Executive Service members may only be suspended for more than 14 calendar days;

iii. Removal from Federal service for failing to follow a direct order.
c. During the notice periods preceding adverse employment actions, DoD civilian employees generally should not be placed on administrative leave. DoD Components should require DoD civilian employees to continue to telework or report to the worksite and follow all mitigation measures applicable to not fully vaccinated DoD civilian employees when reporting to the worksite.

d. DoD Components will designate officials, at the appropriate organizational level, to handle the disciplinary process to promote consistent application of disciplinary measures. Such officials will decide each case with due regard to the facts and circumstances of that case.

e. Supervisors should contact their servicing human resources and legal offices to discuss options available to address individual situations regarding enforcement of this requirement.

f. For employees who have not yet attested to vaccination status; are not vaccinated and did not submit an exemption request, or have not begun vaccination following denial of an exemption request, Components are generally encouraged to continue with robust education and counseling efforts as the first step in an enforcement process, with no subsequent enforcement actions beyond that education and counseling and, if warranted, a letter of reprimand, until the new calendar year begins in January 2022.

g. DoD Components are encouraged to identify an occupational health office, medical office, or other resource with which a DoD civilian employee may consult during the period of counseling and education.

4. Exemptions to DoD Civilian Employee COVID-19 Vaccination Requirement:

a. Exemption Requests and Decision-Making Procedures. DoD civilian employees may request an exemption on the basis of a medical condition or circumstance or a sincerely held religious belief, practice or observance. Because all DoD civilian employees must now be vaccinated against COVID-19 as a condition of employment, exemptions will be granted in limited circumstances and only where legally required. The Secretaries of the Military Departments and the Director of Administration and Management for all other DoD Components will oversee Component implementation of the following decision-making procedures.

b. Personnel.

i. Decision Authorities. Management official(s) will be designated to serve as Decision Authorities to make decisions concerning requests for exemption from the COVID-19 vaccination requirement, in consultation with the organization’s servicing legal office. Decision Authorities will be at an appropriate level within the organization to consider the impact, if any, that granting a request will have on the DoD Component operations and to promote similar cases being handled in a consistent manner, with due regard
for the facts and circumstances of each case. Each employee’s request must be considered on its own merits.

ii. Subject Matter Experts. DoD Components may identify subject matter experts in areas such as human resources (HR), equal employment opportunity (EEO), medicine, and religious matters to serve as advisors to assist Decision Authorities. Such advisors may provide individual advice, as needed by the Decision Authority, but may not be used to develop a group or consensus recommendation or decision.

iii. Administrative Support. DoD Components will provide appropriate personnel and other resources to administratively support the Decision Authorities, including support necessary to assist the Decision Authorities with preparing written products.

c. Employee Notice. DoD Components will inform DoD civilian employees how to make a request for an exemption and notify them that requests must have been submitted no later than November 8, 2021, absent extenuating circumstances, to be considered timely. A DoD civilian employee’s failure to submit a timely request for exemption is not a basis to deny a request but may be relevant in evaluating the request.

d. Employee Responsibilities. To make a request for exemption from the COVID-19 vaccination requirement, DoD civilian employees must submit a request to their direct supervisor. For purposes of submitting this exemption request, “direct supervisor” includes an authorized human resources official. The employee must provide an official statement which describes the medical or religious reason the employee objects to vaccination against COVID-19. Generally, such requests must be in writing. DoD civilian employees may use DD Form 3176 (Attachment 5) or DD Form 3177 (Attachment 6) to submit their requests. DoD civilian employees who make oral requests may be provided a sample written request format and/or be interviewed to develop the basis for the request. While the use of the DD Form 3176 and DD Form 3177 is optional for DoD civilian employees, when DoD civilian employees make a request, they must provide the following information:

i. Medical Exemption Requests.
   - A description of the medical condition or circumstance that is the basis for the request for a medical exemption from the COVID-19 vaccination requirement;
   - An explanation of why the medical condition or circumstance prevents the employee from being safely vaccinated against COVID-19;
   - If it is a temporary medical condition or circumstance, a statement concerning when it will no longer be a medical necessity to delay vaccination against COVID-19; and
   - Any additional information, to include medical documentation that addresses the employee’s particular medical condition or circumstance, which may be helpful in resolving the employee’s request for a medical exemption from the COVID-19 vaccination requirement.
ii. Religious Exemption Requests.
   - A description of the religious belief, practice, or observance that is the basis for the request for a religious exemption from the COVID-19 vaccination requirement;
   - A description of when and how the DoD civilian employee came to hold the religious belief or observe the religious practice;
   - A description of how the DoD civilian employee has demonstrated the religious belief or observed the religious practice in the past;
   - An explanation of how the COVID-19 vaccine conflicts with the religious belief, practice, or observance;
   - A statement concerning whether the DoD civilian employee has previously raised an objection to a vaccination, medical treatment, or medicine based on a religious belief or practice. If so, a description of the circumstances, timing, and resolution of the matter; and
   - Any additional information that may be helpful in resolving the DoD civilian employee’s request for a religious exemption from the COVID-19 vaccination requirement.

e. Supervisor Responsibilities.
   i. Following receipt of an employee’s request for exemption, supervisors must update Section B of the employee’s DD Form 3175 to indicate that a request for exemption determination is pending.
   ii. As necessary, supervisors will engage with the employee to ensure completeness of the employee’s exemption request.
   iii. In coordination with human resources officials, supervisors will prepare an exemption request package that contains factual information about the circumstances of the employee’s request. A complete exemption request package will include the basis for the employee’s request and any supporting documentation submitted by the employee, a description of the nature of the employee’s job responsibilities and work environment, and any circumstances relevant to a management-level assessment of the reasonably foreseeable effects on the agency’s operations, including protecting the agency’s workforce and members of the public with whom the employee interacts in the workplace from COVID-19, if the employee remains unvaccinated.
   iv. Supervisors will forward the exemption request package to the Decision Authority Support Office.

f. Decision Authority Support Office.
   i. DoD Components will establish Decision Authority Support Offices to support exemption request Decision Authorities.
   ii. The Decision Authority Support Office will intake exemption request packages and, under the supervision of the Decision Authority, provide administrative support to the Decision Authority.
   iii. At the request of the Decision Authority, the Decision Authority Support
Office may coordinate with subject matter experts to obtain written documentation which includes relevant factual information and, as necessary, a professional opinion related to the factual information, for inclusion in the exemption request package.

iv. The Decision Authority Support Office may not provide a consensus opinion or recommendation to the Decision Authority.

g. Decision Authority Determination.

i. The Decision Authority first analyzes the exemption request package. As necessary, the Decision Authority may request additional information and consult with subject matter experts.

ii. After conducting a review of the exemption request, the Decision Authority makes a determination, prepares a written statement that includes the reasons for the determination (which may involve drafting assistance based on the Decision Authority’s instructions regarding its contents), and obtains a legal review of the determination.

iii. In cases where the exemption is temporary or denied, the Decision Authority’s determination must specify a date by which the DoD civilian employee must be fully vaccinated against COVID-19. In specifying that date, DoD civilian employees must be given a minimum period of 14 days to receive their first (or only) dose of a COVID-19 vaccine.

h. Employee Notification of Determination. The Decision Authority Support Office will transmit the Decision Authority’s written determination to the DoD civilian employee’s supervisor, who, in turn, provides the DoD civilian employee with a copy of the written determination, updates the DD Form 3175, and informs the DoD civilian employee of next steps.

i. A chart illustrating the exemption request process is below.

<table>
<thead>
<tr>
<th>Position</th>
<th>Role/Responsibility</th>
<th>Output</th>
<th>Submit to</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requesting employee</td>
<td>Attest to vaccination status via DD Form 3175 to indicate exemption pending.</td>
<td>Completed DD Form 3175.</td>
<td>Supervisor</td>
</tr>
<tr>
<td>Requesting employee</td>
<td>Request exemption.</td>
<td>Completed DD Form 3176 (medical) or DD Form 3177 (religious), as appropriate, or other request that contains the information required by FHP 23, Revision 3.</td>
<td>Supervisor</td>
</tr>
<tr>
<td>Role</td>
<td>Task Description</td>
<td>Exemption Request Package</td>
<td>Role</td>
</tr>
<tr>
<td>-------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------</td>
</tr>
<tr>
<td>Supervisor, in consultation with HR officials</td>
<td>Provide relevant information concerning employee’s occupation and work environment, to include: availability of measures to physically distance requestor from co-workers and members of the public, the volume of exemption requests in the organization, and any other relevant information concerning the circumstances of the employee’s request.</td>
<td>Exemption request package that includes employee’s request and supervisory information concerning employee’s occupation, work environment, and other circumstances of the request.</td>
<td>Decision Authority Support Office</td>
</tr>
<tr>
<td>Decision Authority Support Office</td>
<td>Receive and track processing of exemption request package. Supplement package with individual advice from subject matter experts and relevant factual information, as directed by the Decision Authority.</td>
<td></td>
<td>Decision Authority Support Office</td>
</tr>
<tr>
<td></td>
<td>Exemption request package that includes employee’s request; supervisor information concerning employee’s occupation, work environment, and other circumstances of the request; and any supporting documentation relevant to the Decision Authority’s analysis.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Decision Authority</td>
<td>Review submitted documentation, request any reasonably necessary additional information, and prepare written decision in consultation with legal advisors and with the advice of subject matter experts as appropriate.</td>
<td>Written decision that addresses employee’s individual circumstances and has been reviewed by appropriate legal advisors.</td>
<td>Supervisor</td>
</tr>
<tr>
<td>-------------------</td>
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<td>-------------------------------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Supervisor</td>
<td>Receive decision, discuss with employee. If exemption approved, implement mitigation measures and, if necessary, address any follow-on requests for accommodation in accordance with Component EEO procedures. If disapproved, provide opportunity for counseling by medical professional or other appropriate expert/initiate requirement for vaccination. Work with the legal advisor(s) and, as appropriate, HR LMER and EEO offices.</td>
<td>If approved, employee continues to comply with generally-applicable mitigation measures (e.g., screening, testing, masking, and physical distancing) and any other mitigation measures directed by the Decision Authority or management officials. If disapproved, vaccination tracking and/or progressive discipline.</td>
<td>Employee</td>
</tr>
</tbody>
</table>

j. Exemption Criteria.

i. Religious Exemption Requests. Requests for religious exemption will be analyzed pursuant to the Religious Freedom Restoration Act of 1993 (RFRA), 42 U.S.C. § 2000bb et seq. RFRA prohibits the Government from substantially burdening a person’s exercise of religion, unless it demonstrates
that application of the burden to the person is in furtherance of a compelling governmental interest and is the least restrictive means of furthering that compelling governmental interest. In the first instance, Decision Authorities are to determine whether the requestor has met his or her burden to establish that the vaccination requirement imposes a substantial burden on exercise of a sincerely held religious belief. If so, Decision Authorities analyze the request to determine whether the burden on religious exercise is the least restrictive means of furthering the Government's compelling interest in health and safety of the DoD workforce, and the health and safety of members of the public with whom they interact. If vaccination is not the least restrictive means, the exemption will be granted and supervisors will implement the less restrictive means.

ii. Medical Exemption Requests. Pursuant to the Rehabilitation Act of 1973, as amended, 29 U.S.C. § 791 et seq. Decision Authorities will analyze requests for medical exemption to determine whether the medical condition or circumstance prevents the employee from safely being vaccinated. If so, the employee will be exempt from vaccination (temporarily or permanently, as appropriate). Supervisors will direct compliance with applicable force health protection guidance and direct any mitigation measures that are necessary to prevent the spread of the virus that causes COVID-19 in the workplace and to the members of the public with whom the employee interacts. If such measures result in the employee being unable to perform the essential functions of the position, such matters will be referred to the equal employment opportunity reasonable accommodation process.

k. Additional Guidance.

i. Information collected concerning medical and religious exemption requests must be maintained in accordance with the privacy requirements in Attachment 9. Requests for medical exemption will be treated as medical records to be maintained separately from other personnel files.

ii. Discipline for failure to meet the COVID-19 vaccination requirement will not be initiated against a DoD civilian employee while a request for a medical or religious exemption from the COVID-19 vaccination requirement is pending determination. If a DoD civilian employee submits a request after discipline is initiated, disciplinary measures may be held in abeyance where appropriate.

iii. DoD civilian employees who are not fully vaccinated but who have a pending request for exemption from vaccination are required to comply with all force health protection and mitigation measures that are applicable to DoD civilian employees in the worksite who are not fully vaccinated (for example, screening testing (Attachment 7), masking, and physical distancing). Requests for reasonable accommodation related to those measures will be combined with any pending medical or religious exemption to vaccination request, for purposes of making a final determination concerning those measures. Without making a finding concerning whether a sufficient basis for a reasonable accommodation concerning those measures exists, the supervisor
may use the normal interactive process to pursue a temporary accommodation that protects the health and safety of the workplace while a decision concerning those measures is pending. Otherwise, requests for reasonable accommodation related to force health protection and mitigation measures may be analyzed separately from requests for exemption from vaccination.

iv. A DoD civilian employee who receives an exemption from the vaccination requirement may, because of the exemption, be unable to perform the duties and responsibilities of the position without a change in working conditions. Supervisors will immediately implement any mitigation measures required by the Decision Authority and applicable force health protection guidance. Supervisors may engage in the normal interactive process concerning any other measures necessary to protect the health and safety of the workplace.

v. Requests for exemption from candidates for employment will be handled consistent with the provisions in this attachment.

vi. Unless responsibility is otherwise established in a written support agreement, the Combatant Command Support Agent identified in reference (h) is responsible for administration of exemption processes applicable to DoD civilian employees assigned, detailed, or otherwise deployed to a Combatant Command area of responsibility.
ATTACHMENT 2
Requirements for DoD Contractor Personnel, Official Visitors, and Others Seeking Access to Facilities

1. DoD Contractor Personnel

   a. For DoD contractor personnel, the DoD civilian vaccination deadline of November 22, 2021, does not apply. Vaccination requirements for DoD contractor personnel will be in accordance with reference (i), as implemented by reference (j), as directed under Executive Order 14042 (reference (k)).

   b. DoD contractor personnel will complete the DD Form 3150, “Contractor and Visitor Certification of Vaccination” (Attachment 4), maintain a current completed DD Form 3150, and show it to authorized DoD personnel upon request. Failure to complete the DD Form 3150 may result in denying DoD contractor personnel access to the DoD facility to which access is sought.

   c. DoD contractor personnel who are not fully vaccinated against COVID-19 because they are not performing under a covered contract that requires COVID-19 vaccination, due to a legally required accommodation, or who decline to attest to their COVID-19 vaccination status will be subject to COVID-19 screening testing at least weekly as set forth in this guidance (Attachment 7). DoD contractor personnel who refuse required screening testing will be denied access to DoD facilities.

   d. In accordance with applicable contracts, DoD contractor personnel may be offered, but are not required to receive, COVID-19 vaccines at their DoD worksites.

2. Official Visitors

   a. Official visitors will complete DD Form 3150, “Contractor and Visitor Certification of Vaccination” (Attachment 4), and maintain a current completed DD Form 3150 and show it to authorized DoD personnel, upon request. Failure to complete the DD Form 3150 may result in denial of an official visitor’s access to the DoD facility to which access is sought.

   b. Official visitors who are not fully vaccinated against COVID-19, or who decline to volunteer their COVID-19 vaccination status, must show an electronic or paper copy of negative results from an FDA-authorized or approved COVID-19 test administered no earlier than 72 hours prior to their visit. If an official visitor is unable to show a negative COVID-19 test result, the visitor may be provided onsite self-testing, if available, or will be denied access to the DoD facilities to which access is sought. Service members who are not on active duty at the time of their official visit are subject to the requirements in this paragraph.

c. Official visitors will follow applicable policies and procedures of both DoD and the Department or Agency they are visiting, if different from DoD.

3. **Others Seeking Access to Facilities**

Individuals other than official visitors seeking access to facilities located on DoD installations, but operated by other Federal departments and agencies, will follow the policies and procedures of that other department or agency.
## ATTACHMENT 3

**DD Form 3175 – “DoD Civilian Employee Certification of Vaccination”**

CUI (when filled in)

### DoD CIVILIAN EMPLOYEE CERTIFICATION OF VACCINATION

#### PRIVACY ACT STATEMENT

**Authority:** Pursuant to 5 U.S.C. chapters 11 and 79, and in discharging the functions directed under Executive Order 14043, Requiring Coronavirus Disease 2019 Vaccination for Federal Employees (Sept. 9, 2021), DoD is authorized to collect this information. Additional authorities for the systems of records associated with this collection of information also include: E.O. 13691, Protecting the Federal Workforce and Requiring Mask-Wearing; E.O. 12196, Occupational Safety and Health Program for Federal Employees; 10 U.S.C., 113, 10 U.S.C. 136, 10 U.S.C. 7013, 10 U.S.C. 8013, 10 U.S.C. 8013, 10 U.S.C. 2672; DoD Directive 5525.21; and DoD Instruction 5200.03. Providing this information is mandatory, and DoD is authorized to impose penalties for failure to provide the information pursuant to applicable Federal personnel laws and regulations.

**Principal Purpose:** This information is being collected and maintained to implement Coronavirus Disease 2019 (COVID-19) workplace safety plans, and ensure the safety and protection of the DoD workforce, workplace, and other DoD facilities and environments, consistent with the above-referenced authorities, the COVID-19 Workplace Safety; Agency Model Safety Principles established by the Safer Federal Workforce Task Force, and guidance from the Centers for Disease Control and Prevention and the Occupational Safety and Health Administration.

**Routine Use(s):** While the information requested on this form is intended to be used primarily for internal purposes, in certain circumstances it may be necessary to disclose this information externally, for example to disclose information to: a person, organization or governmental entity as necessary and relevant to notify them of, respond to, or guard against a public health emergency, or other similar crisis, including to comply with laws governing the reporting of communicable disease or other laws concerning health and safety in the work environment; adjudicative bodies (e.g., the Merit System Protection Board), arbitrators, and hearing examiners to the extent necessary to carry out their authorized duties regarding Federal employment contractors, grantees, experts, consultants, students, and others as necessary to perform their duties for the Federal government; or agencies, courts, and persons as necessary and in accordance with requirements for law enforcement; or to a person authorized to act on your behalf.


**Consequences of Failure to Provide Information:** Providing this information is mandatory. Unless granted an exemption, all covered Federal civilian employees are required to be vaccinated against COVID-19. Employees are required to provide documentation concerning their vaccination status to their employing DoD Component. Failure to provide this information may subject you to disciplinary action, including and up to removal from Federal service.

**INSTRUCTIONS:** Section A of this form should be completed by DoD civilian employees only. Section B of this form should be completed by the DoD civilian employee’s supervisor (or authorized human resources official). This form should be completed by DoD civilian employees only. Service members and employees of DoD contractors should not complete this form.

### SECTION A.

**To be completed by DoD civilian employees.**

<table>
<thead>
<tr>
<th>1. CIVILIAN EMPLOYEE NAME (Last, First, M):</th>
<th>2. CIVILIAN EMPLOYEE DoD ID NUMBER:</th>
</tr>
</thead>
</table>

### 3. PLEASE CHECK ALL THAT COINCIDES WITH YOUR COVID-19 VACCINATION STATUS:

- [ ] 3.a. I am fully vaccinated. Individuals are considered “fully vaccinated” two weeks after completing the second dose of a two-dose COVID-19 vaccine or two weeks after receiving a single dose of a one-dose vaccine. Accepted COVID-19 vaccines are those which have received a license or emergency use authorization from the U.S. Food and Drug Administration and those COVID-19 vaccines on the World Health Organization Emergency Use Listing. Fully vaccinated also includes circumstances in which the individual was a participant in a U.S. clinical trial and has received all recommended doses.

- [ ] 3.b. I have received one or more doses, but I am not yet considered fully vaccinated (in accordance with the definition of fully vaccinated above).

- [ ] 3.c. I have submitted proof of vaccination to my supervisor.

- [ ] 3.d. I have not received any vaccination doses.

- [ ] 3.e. I have submitted a request for an exemption from vaccination and a decision is still pending.

- [ ] 3.f. I have an approved exemption from vaccination.
### 4. EMPLOYEE VACCINE INFORMATION

(Employee checking block 3.a. should skip block 4 and go to block 5):

<table>
<thead>
<tr>
<th>4.a. VACCINE MANUFACTURER(S) OR VACCINE PRODUCT NAME(S):</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Pfizer-BioNTech/Comirnaty</td>
</tr>
<tr>
<td>□ Moderna</td>
</tr>
<tr>
<td>□ AstraZeneca/Oxford</td>
</tr>
<tr>
<td>□ Johnson and Johnson (J&amp;J)/Janssen</td>
</tr>
<tr>
<td>□ Novavax</td>
</tr>
<tr>
<td>□ Other U.S. Food and Drug Administration licensed or authorized,</td>
</tr>
<tr>
<td>World Health Organization Emergency Use listed vaccine or U.S. site clinical trial vaccine (provide name):</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.b. DATE OF FIRST DOSE:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.c. DATE OF SECOND DOSE (if two-dose vaccine):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.d. DATE FULLY VACCINATED:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### 5. CERTIFICATION/KNOWLEDGE OF POSSIBLE ACTIONS FOR FALSE STATEMENTS

I certify that the information I have provided on this form and the proof of vaccination documentation I have submitted is true and correct.

I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both (18 U.S.C. 1001). I understand that making a false statement on this form could result in additional administrative action including adverse personnel action up to and including removal from my position.

### 6. CIVILIAN EMPLOYEE SIGNATURE:

### 7. DATE:

### SECTION B. To be completed by the supervisor of the DoD civilian employee completing section A (or an authorized human resources official)

### 8. SUPERVISOR PROOF OF VACCINATION REVIEW

<table>
<thead>
<tr>
<th>8.a. Proof of vaccination not received.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8.b. Proof of vaccination received and under review.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8.c. Proof of vaccination received and reviewed.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### 9. STATUS OF VACCINATION - EXEMPTION REVIEW

<table>
<thead>
<tr>
<th>9.a. Exemption request received and pending disposition.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9.b. Exemption request received and approved.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9.c. Exemption request received and denied.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### 10. SUPERVISOR / AUTHORIZED HR OFFICIAL NAME (Last, First, M.I):

### 11. SUPERVISOR / AUTHORIZED HR OFFICIAL

### DoD ID NUMBER:

### 12. SUPERVISOR / AUTHORIZED HR OFFICIAL SIGNATURE:

### 13. DATE:

---

**DD FORM 3175, OCT 2021**

PREVIOUS EDITION IS OBSOLETE.
## ATTACHMENT 4
### DD Form 3150 – “Contractor Personnel and Visitor Certification of Vaccination”

**CUI (when filled in)**

<table>
<thead>
<tr>
<th>CONTRACTOR PERSONNEL AND VISITOR CERTIFICATION OF VACCINATION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AGENCY DISCLOSURE NOTICE</strong></td>
</tr>
<tr>
<td>The public reporting burden for this collection of information is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at wsh.mil/esc or <a href="mailto:mix.ddou.informationcollections@mail.mil">mix.ddou.informationcollections@mail.mil</a>. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.</td>
</tr>
<tr>
<td><strong>PRIVACY ACT STATEMENT</strong></td>
</tr>
<tr>
<td>Principal Purpose: This information is being collected to implement Coronavirus Disease 2019 (COVID-19) workplace safety plans, including DoD's COVID-19 testing programs, and to ensure the safety and protection of the DoD workforce, workplace, and other DoD facilities and environments, consistent with the above-referenced authorities, the COVID-19 Workplace Safety Agency Model Safety Principles established by the Safer Federal Workforce Task Force, and guidance from the Centers for Disease Control and Prevention and the Occupational Safety and Health Administration.</td>
</tr>
<tr>
<td>Routine Use(s): While the information requested on this form is intended to be used primarily for internal purposes, in certain circumstances it may be necessary to disclose this information externally, for example to disclose information to a person, organization, or governmental entity as necessary and relevant to notify them of, respond to, or guard against a public health emergency or other similar crisis, including to comply with laws governing the reporting of communicable disease or other laws concerning health and safety in the work environment; adjudicative or administrative proceedings; contractors, grantees, experts, consultants, students, and others as necessary to perform their duties for the Federal government; agencies, courts, and persons as necessary and relevant in the course of litigation, and as necessary and in accordance with requirements for law enforcement; or to a person authorized to act on your behalf. A complete list of routine uses may be found in the applicable System of Records Notice (SORN) associated with the collection of this information from contractor personnel and DoD visitors. DPR 39 DoD, DoD Personal Accountability and Assessment System of Records, 85 Fed. Reg. 17047 (Mar. 25, 2020) (also available at <a href="https://www.govinfo.gov/dockets/PDFs/49/2020/17047.pdf">https://www.govinfo.gov/dockets/PDFs/49/2020/17047.pdf</a>).</td>
</tr>
<tr>
<td>Consequences of Failure to Provide Information: Providing this information is voluntary. However, if you fail to provide this information, you will be treated as not fully vaccinated for purposes of implementing safety measures, including subject to COVID-19 screening testing and/or denied access to DoD facilities. Failure to provide such information may also hinder DoD's ability to implement COVID-19 workplace safety plans, thereby increasing the health or safety risk to DoD-affiliated personnel and DoD facilities.</td>
</tr>
<tr>
<td><strong>INSTRUCTIONS:</strong> This form should be completed by DoD contractor personnel and official visitors in accordance with current DoD Force Health Protection Guidance. DoD civilian employees should not complete this form.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1. NAME (Last, First, MI):</th>
<th>2. DoD ID NUMBER:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>3. PLEASE CHECK THE BOX BELOW THAT COINCIDES WITH YOUR COVID-19 VACCINATION STATUS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ I am fully vaccinated. Individuals are considered “fully vaccinated” two weeks after completing the second dose of a two-dose COVID-19 vaccine or two weeks after receiving a single dose of a one-dose vaccine. Accepted COVID-19 vaccines are those which have received a license or emergency use authorization from the U.S. Food and Drug Administration and those COVID-19 vaccines on the World Health Organization Emergency Use Listing. &quot;Fully vaccinated&quot; also includes circumstances in which the individual was a participant in a U.S. site clinical trial and has received all recommended doses.</td>
</tr>
<tr>
<td>□ I am not yet fully vaccinated. I received only one dose of an accepted two-dose COVID-19 vaccine less than two weeks ago.</td>
</tr>
<tr>
<td>□ I have not been vaccinated.</td>
</tr>
<tr>
<td>□ I decline to respond.</td>
</tr>
</tbody>
</table>

| Individuals who choose not to complete the form will be assumed to be not fully vaccinated for purposes of application of the safety protocols, if you are not vaccinated due to medical or religious reasons, please check either "I have not been vaccinated" or "I decline to respond." Note that if you have already received one dose of a vaccine, but are not yet fully vaccinated, or if you received your final dose less than two weeks ago, then you will be treated as not fully vaccinated until you are at least two weeks past your final dose and resubmit your vaccination information. |
| □ I certify that the information provided in this form is accurate and true to the best of my knowledge. |

I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both (18 U.S.C. 1001). Checking "I decline to respond" does not constitute a false statement.

<table>
<thead>
<tr>
<th>4. DATE (YYYY/MM/DD)</th>
<th>5. SIGNATURE (Full Name)</th>
</tr>
</thead>
</table>

**DD FORM 3150, OCT 2021**

**CUI (when filled in)**
### ATTACHMENT 5

**DD Form 3176 – “Request for a Medical Exemption or Delay to the COVID-19 Vaccination Requirement”**

**CUI (when filled in)**

<table>
<thead>
<tr>
<th>REQUEST FOR A MEDICAL EXEMPTION OR DELAY TO THE COVID-19 VACCINATION REQUIREMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>OMB No. 0704-0619</td>
</tr>
<tr>
<td>Exp. 2022/430</td>
</tr>
</tbody>
</table>

**PRIVACY ACT STATEMENT**


- Principal Purpose: The information on this form is being collected so that DoD may determine whether to grant your request for a medical exemption from the COVID-19 vaccination requirement for federal employees, pursuant to Executive Order 14043 and in furtherance of COVID-19 workplace safety plans.

- Routine Use(s): While the information requested on this form is intended to be used primarily for internal purposes, it may be necessary to disclose this information externally. For example, disclosure of medical condition or history information to authorized government officials for the purpose of conducting an investigation into DoD’s compliance with the Rehabilitation Act of 1973; disclosure of medical condition or history information to first aid and safety personnel in the event an employee’s medical condition might require emergency treatment or special procedures; to Federal agencies/entities participating in the DoD Computer/Electronic Accommodations Program (CAP) to permit the agency to carry out its responsibilities under the program; or to the applicable System of Records (SOR) associated with the collection of this information: DoD 0007, DoD Reasonable Accommodations and Assistive Technology Records, 48 Fed. Reg. 36892 (July 22, 2010) available at [https://www.govinfo.gov/content/pkg/FR-2021-07-22/pdf/2021-15663.pdf](https://www.govinfo.gov/content/pkg/FR-2021-07-22/pdf/2021-15663.pdf).

- Consequences of Failure to Provide Information: Providing this information is voluntary and use of this form is optional. Failure to provide the information requested on this form may impact DoD’s ability to evaluate or act upon a request for a medical exemption from the COVID-19 vaccination requirement. Any intentional misrepresentation to the Federal Government may result in legal consequences, including termination or removal from Federal Service.

- Instructions: Part 1 is to be completed by DoD civilian employees. Part 2 is to be completed by a licensed health care provider. Provide narrative responses where applicable (Blocks 8-10, 15-17). If additional space is needed, proceed on the appropriate continuation block (Block 11 or 20) by annotating the Section and Line number and continue your narrative response. Each line constitutes a declaration that the information you provide is, to the best of your knowledge and ability, true and correct. Any intentional misrepresentation to the Federal Government may result in legal consequences, including removal from Federal Service.

#### PART 1. TO BE COMPLETED BY THE DoD CIVILIAN EMPLOYEE

<table>
<thead>
<tr>
<th>1. Employee Name (Last, First, Middle Initial)</th>
<th>2. DoD ID Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Office Symbol</th>
<th>4. Date of Request (YYYY/MM/DD)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Position/Title</th>
<th>6. Supervisor Name</th>
<th>7. Supervisor Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 8. Please provide a description of the medical condition or circumstance that is the basis for the request for a medical exemption from the COVID-19 vaccination requirement.

#### 9. Please provide an explanation of why the medical condition or circumstance prevents you from being vaccinated.

#### 10. Please provide any additional information, that addresses your particular medical condition or circumstance, which may be helpful in resolving your request for a medical exemption or delay from the COVID-19 vaccination requirement. If you have medical documentation (in addition to Part 2 of this Form) that addresses your particular medical condition or circumstance you may submit the documentation to your supervisor along with this form.
I declare to the best of my knowledge and ability that the foregoing is true and correct.

PART 2. COMPLETED BY EMPLOYEE'S HEALTH CARE PROVIDER

14. Employee Name

MEDICAL CERTIFICATION FOR COVID-19 VACCINE EXEMPTION OR DELAY

Dear Health Care Provider:

The Department of Defense requires its employees to be fully vaccinated against COVID-19, pursuant to Executive Order of the President of the United States. As indicated in Part 1, the individual named above is seeking a medical exemption to the requirement for COVID-19 vaccination or a delay because of a temporary condition or medical circumstance. Please complete this form to assist the Department in its review process.

Please provide at least the following information, where applicable, and use the continuation block as needed:

15. Please identify any contraindication(s) or precaution(s) for COVID-19 vaccination that are applicable to the individual, and for each contraindication or precaution, indicate:
   (a) whether it is recognized by the U.S. Centers for Disease Control and Prevention pursuant to its guidance; and
   (b) whether it is listed in the package insert or Emergency Use Authorization fact sheet for each of the COVID-19 vaccines authorized or approved for use in the United States.

16. Please provide a statement detailing how the individual's condition and medical circumstances are such that COVID-19 vaccination is not considered safe. Please explain the specific nature of the medical condition or circumstance that contraindicates immunization with a COVID-19 vaccine or might increase the risk for a serious adverse reaction.

17. Please provide any other medical information that would limit the employee from receiving any COVID-19 vaccine.

18. The condition described above is:
   - [ ] Temporary
   - [ ] Long-Term/Permanent

19. If the employee is seeking a delay due to a temporary medical condition or circumstance, please indicate when the employee would be able to safely receive a COVID-19 vaccination - provide details if limited to specific COVID-19 vaccine(s) or type(s) of COVID-19 vaccine.

20. Continuation

21. Health Care Provider Name/Title

22. Date (YYYY/MM/DD)

23. Medical Provider Signature
# ATTACHMENT 6

**DD Form 3177 – “Request for a Religious Exemption to the COVID-19 Vaccination Requirement”**

**CUI (when filled in)**

## REQUEST FOR A RELIGIOUS EXEMPTION TO THE COVID-19 VACCINATION REQUIREMENT

### PRIVACY ACT STATEMENT


**Principal Purpose:** The information on this form is being collected so that DoD may determine whether to grant your request for a religious exemption from the COVID-19 vaccination requirement for federal employees, pursuant to Executive Order 14043 and in furtherance of COVID-19 workplace safety plans. Consistent with the Religious Freedom Restoration Act of 1993, 42 U.S.C. Chapter 21, and Title VII of the Civil Rights Act, 42 U.S.C. Chapter 21, Subchapter VI, individuals seeking a religious exemption from the vaccination requirement will submit to DoD supporting information about their religious beliefs or practices in order for DoD to evaluate the exemption request.

**Routine Use:** While the information requested on this form is intended to be used primarily for internal purposes, in certain circumstances it may be necessary to disclose this information externally. For example, to disclose information to a person, organization, or governmental entity as necessary and relevant to notify them of, respond to, or guard against a public health emergency or other similar crises, including to comply with laws governing the reporting of communicable disease or other laws concerning health and safety in the workplace; adjudicate or administrative bodies or courts when the records are relevant and necessary to an administrative or administrative proceeding; contractors, grantees, experts, consultants, students, and others as necessary to perform their duties for the Federal government; agencies, courts, and persons as necessary and relevant in the course of litigation, and as necessary and in accordance with requirements for law enforcement; or to a person authorized to act on your behalf. A complete list of routine uses may be found in the applicable System of Records Notices (SORN) associated with the collection of this information: DPR: 39 DoD, DoD Personnel Accountability and Assessment System of Records, 85 Fed. Reg. 17047 (Mar. 26, 2020) (also available at https://go.usa.gov/xo87V).

**Consequences of Failure to Provide Information:** Providing this information is voluntary and use of this form is optional. Failure to provide the information requested on this form may impact DoD’s ability to evaluate or act upon a request for a religious exemption from the COVID-19 vaccination requirement. Any intentional misrepresentation to the Federal Government may result in legal consequences, including removal from Federal Service.

**Instructions:** To be completed by DoD civilian employees. Provide narrative responses where applicable (Blocks 8-11, 12.b, 12.c, 13). If additional space is needed, place your narrative response in the continuation block (Block 14) by annotating the Section and Line number and continue your narrative response. Signing this form constitutes a declaration that the information you provide is to the best of your knowledge and ability, true and correct. Any intentional misrepresentation to the Federal Government may result in legal consequences, including removal from Federal Service.

<table>
<thead>
<tr>
<th>Block</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Employee Name (Last, First, Middle initial)</td>
</tr>
<tr>
<td>2.</td>
<td>DoD ID Number</td>
</tr>
<tr>
<td>3.</td>
<td>Office Symbol</td>
</tr>
<tr>
<td>4.</td>
<td>Date of Request (YYYYMMDD)</td>
</tr>
<tr>
<td>5.</td>
<td>Position/title</td>
</tr>
<tr>
<td>6.</td>
<td>Supervisor Name</td>
</tr>
<tr>
<td>7.</td>
<td>Supervisor Phone Number</td>
</tr>
<tr>
<td>8.</td>
<td>Please describe the religious belief, practice, or observance that is the basis for your request for a religious exemption from the COVID-19 vaccination requirement.</td>
</tr>
<tr>
<td>9.</td>
<td>Please describe when and how you came to hold the religious belief or observe the religious practice.</td>
</tr>
<tr>
<td>10.</td>
<td>Please describe how you have demonstrated the religious belief or observed the religious practice in the past.</td>
</tr>
<tr>
<td>11.</td>
<td>Please explain how the COVID-19 vaccines conflict with your religious belief, practice, or observance.</td>
</tr>
</tbody>
</table>
12.a Have you previously raised an objection to a vaccination, medical treatment, or medicine based on a religious belief or practice.

| Yes | No |

12.b If Yes, please provide a description of the circumstances, timing, and resolution of the matter.

| Description |

12.c If No, please provide an explanation as to why your objection is limited to the particular COVID-19 vaccines.

| Explanation |

13. Please provide any additional information that may be helpful in resolving your request for a religious exemption from the COVID-19 vaccination requirement. You may submit additional documentation in support of this request to your supervisor along with this form.

| Additional Information |

14. Continuation

| Continuation |

I declare to the best of my knowledge and ability that the foregoing is true and correct.

| Date (YYYYMMDD) | Signature |

DD FORM 3177, OCT 2021
PREVIOUS EDITION IS OBSOLETE
ATTACHMENT 7
COVID-19 Screening Testing Requirements

1. To establish COVID-19 screening testing for individuals for whom screening testing is required, DoD Components will:

   a. Execute the screening testing requirement with COVID-19 self-collection kits or self-tests at least weekly (depending on the type of test kit used) that should be performed primarily onsite at the installation or facility with proper supervision and documentation of testing results. If onsite COVID-19 screening testing is not feasible, as an alternative self-testing may be performed at home or in other locations (Note: these COVID-19 self-tests do not require a health care provider’s clinical care order and are, therefore, considered an over-the-counter test and do not require medical support to complete). Screening testing will use those tests authorized by Attachment 8; and

   b. Procure and provide these COVID-19 self-tests and establish guidance for where and how these tests will be distributed and conducted and how results are to be reported.

      i. DoD civilian employees are responsible for providing documentation of negative COVID-19 test results, upon receipt, to the appropriate supervisor. For purposes of screening testing requirements, “supervisor” includes authorized human resources officials. DoD civilian employees may not be required to use their own personal equipment for the purpose of documenting test results; offsite tests may not be used if there is not a means to document results using government equipment. The supervisor is responsible for maintaining any COVID-19 test results provided by DoD civilian employees in accordance with the privacy protection measures in Attachment 9.

      ii. DoD contractor personnel with CRA will maintain their most recent COVID-19 test result and show such results to authorized DoD personnel upon request.

2. After COVID-19 screening testing procedures are established, the personnel identified in this memorandum as subject to screening testing are required to have a COVID-19 screening test using a test authorized by Attachment 8, and receive a negative COVID-19 screening test result for entry into a DoD facility. If the COVID-19 screening test is administered offsite, the negative result must be from a test performed within the prior 72 hours. If a COVID-19 screening test is administered onsite, the test will be administered before DoD civilian employees and contractor personnel go to their work areas. In accordance with reference (l) and CDC guidance, personnel who have recovered from a recent COVID infection and who remain asymptomatic are exempted from regular screening testing for 90 days following their documented date of recovery. Documented proof of this recovery shall be provided upon request.

3. DoD civilian employees and DoD contractor personnel with CRA who have positive COVID-19 screening tests will be required to remain away from the workplace in accordance
with references (l) and (m). DoD civilian employees and DoD contractor personnel with CRA with positive COVID-19 screening tests will be offered, but not required to take, confirmatory laboratory-based molecular (i.e., polymerase chain reaction) testing paid for by the relevant DoD Component. Contact tracing and mitigation measures will be conducted in accordance with references (l) and (m). If the confirmatory test is negative, the individual is not considered to be COVID-19 positive and will be allowed into the workplace.

4. For DoD civilian employees, COVID-19 screening testing is expected to take no more than one hour of regular duty time, per test, to complete required testing as directed by the DoD Component. Laboratory-based confirmatory COVID-19 testing for initial positive screening test results is expected to take no more than two hours of duty time. This includes time for travel to the testing site, time to complete testing, and time to return to work. Commanders and supervisors will monitor duty time usage and keep duty time used for testing within these parameters to the extent possible.

5. DoD Components may bar DoD civilian employees who refuse required screening testing from their worksites on the installation or facility to protect the safety of others, including while any progressive disciplinary actions are pending. While barred from their worksites on the installation or facility, such DoD civilian employees may be required to telework, as appropriate.
ATTACHMENT 8
Requirements for Obtaining Self-Collection Kits and Self-Tests

COVID-19 self-tests must have Instructions for Use and FDA approval, 510(K) premarket clearance or have an FDA Emergency Use Authorization, and will be made available through the Defense Logistics Agency. DoD Components are responsible for funding required COVID-19 screening tests.

Funding for COVID-19 testing, if self-collection kits or self-tests are not available:

a. Each DoD Component will reimburse Service members and DoD civilian employees for COVID-19 screening tests that require payment for purposes of meeting the screening testing requirement (e.g., if the screening test is not available through the DoD Component and must be administered by a facility who charges for the test).

b. For COVID-19 testing of DoD contractor personnel with CRA, DoD Components will offer, if available, COVID-19 testing similar to that offered to DoD civilian employees at the DoD Component’s expense and at no cost to the contractor personnel or the contractor.
ATTACHMENT 9
Privacy Requirements

Under this guidance memorandum, the DoD may collect and maintain sensitive and private information about individuals, including medical information. Consistent with the Religious Freedom Restoration Act of 1993, 42 U.S.C. § 2000bb et seq., and Title VII of the Civil Rights Act, 42 U.S.C. § 2000e et seq., individuals seeking a religious exemption from the vaccination requirement will submit to DoD supporting information about their religious beliefs and practices in order for DoD to evaluate the exemption request. Information collected from individuals under this guidance, including vaccination information, test results, and medical or religious information supporting vaccine exemption requests, will be treated in accordance with applicable laws and policies on privacy, including the Privacy Act of 1974, 5 U.S.C. § 552a, and Department of Defense Instruction (DoDI) 5400.11, “DoD Privacy and Civil Liberties Programs,” January 29, 2019 (reference (n)), the Rehabilitation Act of 1973, as amended (“Rehabilitation Act”), 29 U.S.C. § 791 et seq., and 5 CFR part 293, subpart E. While such information may be sensitive and is to be safeguarded, it is not covered by the Health Insurance Portability and Accountability Act (HIPAA) regulations found at 45 CFR parts 160, 162, and 164, and as implemented in DoDI 6025.18, “Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule Compliance in DoD Health Care Programs,” and DoD Manual 6025.18, “Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule in DOD Health Care Programs.”

Information gathered under this guidance may be shared with immediate supervisors, authorized human resources officials, designated decision makers, and, in appropriate cases, subject matter experts, who must access the information to implement the guidance. DoD Components are advised to consult their Component Privacy Officer and servicing legal office if there is a need to share medical or religious information collected under this guidance with DoD personnel beyond what this guidance permits or with individuals outside of DoD. Religious information will be accessible only to those persons who have a role in carrying out the procedures outlined in this memorandum. Medical information obtained from DoD civilian employees, including vaccination status, will be accessible only to immediate supervisors, authorized human resources officials, and, for exemption requests, designated decision makers and subject matter experts, who must access the information to implement the guidance in this memorandum. The Rehabilitation Act’s requirements on confidentiality of medical information apply whether or not a DoD civilian employee has a disability.

DoD personnel will use appropriate safeguards in handling and storing DoD civilian employee medical information, including a DoD civilian employee’s proof of vaccination, the DD Form 3175, COVID-19 test results, and exemption requests. Appropriate safeguards may include encrypting emails and electronic files, and role-based access to electronic storage environments where this information is maintained. In the event the information is maintained in paper form, supervisors and other authorized DoD personnel must ensure DoD civilian employee medical information remains confidential and is maintained separately from other personnel files (e.g., stored in a separate, sealed envelope marked as confidential DoD civilian employee medical information and maintained in locked file cabinets or a secured room). DoD Components are advised to refer to applicable internal guidance on the handling, storage, and disposition of DoD civilian employee medical records, and to consult their Component Privacy Officer as needed for further guidance.
ATTACHMENT 10
References

(c) Executive Order 14043, “Requiring Coronavirus Disease 2019 Vaccination for Federal Employees,” September 9, 2021
(d) Deputy Secretary of Defense Memorandum, “Mandatory Coronavirus Disease 2019 Vaccination of DoD Civilian Employees,” October 1, 2021
(e) Secretary of Defense Memorandum, “Mandatory Coronavirus Disease 2019 Vaccination of Department of Defense Service Members,” August 24, 2021
(n) Department of Defense Instruction 5400.11, “DoD Privacy and Civil Liberties Programs,” January 29, 2019