

Covid-19 Vaccine Exemption Interactive Dialogue Questions for Managers (Religious and Disability)

Supervisor Name <i>(Last, First MI)</i>	Ticket Number <i>(Ex: RAR0011223)</i>
Employee Name <i>(Last, First MI)</i>	Employee Position Title <i>(Ex: Border Patrol Agent)</i>

This information is being requested by the Vaccine Exemption Review Board to evaluate an employee’s request for vaccine exemption. This information will help establish whether a vaccine exemption can be provided to the employee. Additional information may be requested.

In determining whether a job function is essential, the Equal Employment Opportunity Commission (the federal agency that enforces the ADA and other discrimination laws) looks at these factors: 1) the employer's assessment of which functions are essential, as demonstrated by job descriptions written before the employer posts or advertises for the position; 2) whether the position exists to perform that function (if the entire job consists of one function, such as loading and unloading boxes or entering information into a database, then that function is essential); 3) the experience of employees who actually hold that position; 4) the time spent performing the function; 5) the consequences of not performing the function; 6) whether other employees are available to perform the function; and 7) the degree of expertise or skill required to perform the function.

Work Environment Questions

(The following questions are helpful for evaluating a request for vaccine exemption)

What kind of work is performed by the employee?

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What are the employee’s essential functions?

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Describe the employees actual work assignments performed on a daily and reoccurring basis? How often does this assignment change?

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Please describe your predominant work environment (ex: office, seaport, land-port, airport, station, outdoors, field, etc.)

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What duties are performed by the employee that require that they interact with the public on a regular and reoccurring basis?

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What is the work setting for this position? How many employees are assigned to the same position and location?

Does the employee regularly come into contact with other federal or contractor employees? If so, how often and how closely?

If the employee needs to interact with others (either coworkers or the public), would social distancing be possible?

Can the employee perform essential duties remotely on a part-time or full-time basis?

Does the employee perform overtime work? How often does the employee work overtime (estimate number of times and hours per week)? Do they perform the same type of duties they perform during the day? Is it a requirement of the position?

Is there an alternative accommodation that has not been considered which would be effective to meet the needs of the agency and the employee?

I verify that the above information, including supporting documents, is complete and accurate to the best of my knowledge. I understand that any intentional misrepresentation may lead to disciplinary action.

Supervisor Signature

Date