

## **Medical exemption – vaccination as a condition of deployment**

### **Self-certification form for people vaccinated abroad**

I hereby certify that I should not be vaccinated with any MHRA-authorized COVID-19 vaccine because I have been vaccinated abroad.

I understand that this temporary exemption is only valid for the purposes of deployment in care homes and is not valid proof for domestic events, international travel and exemption from self-isolation.

I understand that this temporary exemption may expire once further guidance is issued and that I may be required to have a complete course of an authorized COVID-19 vaccination to continue to be deployed in a care home.

I acknowledge that false information may result in disciplinary action.

Name

Date