

## GUIDANCE MATERIAL FOR CANADIAN AERODROME OPERATORS & THE CANADIAN AIR TRANSPORT SECURITY AUTHORITY (CATSA)

### **Federal Vaccination Mandate:**

# Managing Non-Passenger Access to the Restricted Area of a Specified Canadian Airport

This guidance material is intended to provide recommendations and guidance on the operationalization of Transport Canada's Interim Order, <u>Interim Order Respecting Certain Requirements for Civil Aviation Due to COVID-19</u>, No. 44.

<u>Important Caveat:</u> Nothing in this guidance document supersedes any requirement or obligation outlined in Transport Canada's Interim Order. It is meant to complement these legal documents and provide recommendations and guidance on how to understand and carry out the requirements.







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### Section 1 - General

### **Purpose**

The purpose of this guidance document is to outline the requirements under Transport Canada's *Interim Order* related to the Federal Vaccination Mandate as it pertains to the management of non-passengers entering the restricted area of specified aerodromes in Canada (see Annex A for a list).

Given the need to protect workers in the aerodrome environment, all non-passengers will be prohibited from entering the restricted area of specified aerodromes unless they are fully vaccinated. This requirement will go into effect on November 15, 2021.

Advice, guidance, and sample templates have been embedded within this document to help facilitate the implementation of the federal vaccination mandate.

### What is the Federal Vaccination Mandate?

The pandemic has had a devastating impact on Canada's transportation sector. While public health measures, including social distancing and masking, have been critical to combatting the spread of the virus, COVID-19 and its variants continue to pose a significant public health risk to Canadians. Additional measures are therefore needed to ensure the safety and security of Canada's transportation system and facilitate the resumption of safe travel.

To address this, the Government of Canada is requiring vaccination against COVID-19 for federally regulated employees in the transportation sector. Vaccination is one of the most effective tools to reduce the risk of COVID-19 for Canadians, to protect broader public health, and to prevent future outbreaks. A vaccination requirement for the federally regulated air sector enhances the safety of the Canadian aviation system and helps give Canadians the confidence to resume travel, while still adhering to public health measures.

### **Section 2 – Application**

### Which Non-Passengers Fall Under the Federal Vaccination Mandate?

The Federal Vaccine Mandate applies to the following non-passengers:

- A person entering a restricted area at an aerodrome listed in Schedule 2 of the *Interim*Order from a non-restricted area for a reason other than to board an aircraft for a flight;
- A crew member entering a restricted area at an aerodrome listed in Schedule 2 of the *Interim Order* from a non-restricted area to board an aircraft for a flight operated by an air carrier under Subpart 3, 4 or 5 of Part VII of the Regulations;
- A person entering a restricted area at an aerodrome listed in Schedule 2 of the *Interim* Order from a non-restricted area to board an aircraft for a flight only to become a crew
   member, after having been a crew member, or to participate in mandatory training
   required by an air carrier (for those operating under Subpart 3, 4 or 5 of Part VII of the
   Regulations);





- A screening authority at an aerodrome where persons other than passengers are screened or can be screened;
- The operator of an aerodrome listed in Schedule 2 of the *Interim Order*.

The following individuals are <u>excluded</u> from the vaccination mandate policy:

- A member of an emergency response provider personnel who is responding to an emergency;
  - (Note: includes all individuals aiding in the emergency)
- A peace officer who is responding to an emergency;
- A holder of an employee identification document issued by a department, agency or corporation listed in Schedule 3 of the *Interim Order* (due to an equivalent vaccination policy regime applied to federal public servants);
- Those who have been granted an exemption (issued in accordance with the aerodrome operator's or company vaccination policy);
- Foreign flight crew.

<u>Note:</u> The United States Customs Border Patrol and Transportation Security Administration officials will be exempt from the Federal Vaccination mandate policy given that they are covered by their equivalent U.S. National Vaccination Policy.

### **Timeline: Key Dates at a Glance**

| Date              | Requirement  |  |
|-------------------|--|--|
| October 30, 2021  | Vaccination Policies required to be in place   |  |
| November 15, 2021 | <ul> <li>All non-passengers must have received their first vaccine dose and those who are not fully vaccinated must have an accommodation approved by their employer.</li> <li>Non-passengers who are not fully vaccinated to be tested<sup>1</sup> at least twice per week until they are fully vaccinated</li> <li>Random verification of proof of vaccination/exemption documentation begins (Enforcement &amp; Oversight)</li> </ul> |  |
| January 24, 2022  | <ul> <li>All non-passengers must be <u>fully</u> vaccinated, unless exempt from requirement</li> <li>Random verification of proof of vaccination/exemption documentation ends (Enforcement &amp; Oversight)</li> </ul>   |  |

<sup>&</sup>lt;sup>1</sup> Non-passengers may be tested using a rapid antigen test; however, if a positive test result is obtained, a molecular COVID-19 test <u>must</u> be administered. Should a non-passenger receive a positive test result from the molecular test, they must isolate for 14 days.





| Date             | Requirement  |
|------------------|--|
| January 25, 2022 | Companies must suspend aerodrome access privileges for<br>non-passengers who remain unvaccinated and who are not<br>exempt from the requirement to be vaccinated |

# **Section 3 – Obligations of Aerodrome Operators & CATSA**

As of November, 15, 2021, verification of proof of vaccination for non-passengers will begin. All non-passengers who do not meet the requirements will be denied entry to the restricted area (unless an exemption applies).

At the aerodromes <u>with</u> a Non-Passenger Screening (NPS) Program, the Canadian Air Transport Security Authority (CATSA) will perform a random verification of those entering the restricted area of the aerodrome. For those aerodromes <u>without</u> a NPS Program, aerodrome operators will be responsible for the verification process.

Until all Restricted Area Identity Card (RAIC) holders have had their proof of vaccination verified (but no later than January 24, 2022), CATSA and the aerodrome operators will randomly select a specific percentage of non-passengers to verify their digital or paper proof of vaccination, or exemption. The percentage is defined by Transport Canada through SUPPLEMENTARY BULLETIN - INTERIM ORDER RESPECTING CERTAIN REQUIREMENTS FOR CIVIL AVIATION DUE TO COVID-19 (SSCIMS Document ID Number: 132754).

### **Verification Obligations**

#### **Verification Elements for the Proof of Vaccination**

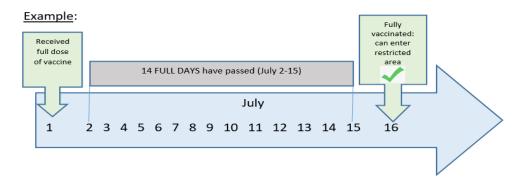
CATSA and aerodrome operators must verify the following elements are included in the proof of vaccination document:

- Full name (family name and given name)
- Date of birth
- The type and manufacturer of the vaccine. It must be one of the following, or an acceptable combination of:
  - Pfizer-BioNTech Comirnaty (tozinameran, BNT162b2) 2 doses
  - Moderna Spikevax (mRNA-1273) 2 doses
  - AstraZeneca Vaxzevria/COVISHIELD (ChAdOx1-S, AZD1222) 2 doses
  - Janssen/Johnson & Johnson (Ad26.COV2.S) 1 dose
- The date of last dose

**Note:** The last dose must have been received at least 14 days prior to the day they are entering the restricted area.







<u>Note</u>: The proof of vaccination <u>must</u> have been issued in English or French, otherwise a certified translation is required if it was issued in a language other than English or French.

#### Federal Proof of Identification and Provincial Proof of Vaccination

There may be circumstances in which the name on the proof of identification does not match the name on the provincial or territorial proof of vaccination. For example, in the Province of Quebec a female's name at birth may appear on the proof of vaccination, while their married name may appear on a federal identification document such as a passport. Other examples includes those from remote or Indigenous communities where formal identification can be more challenging to obtain. Please note that CATSA and the aerodrome operator, in these cases, has flexibility to accept a proof of vaccination that does not perfectly match a non-passengers identification documents, so long as the individual is able to establish their vaccination credential through other means (e.g., health card or letter from Indigenous community leader).

### **Verification Elements for Exemption Documentation**

An exemption can be requested based on medical or religious reasons, as well as if the person is in the process of obtaining the vaccination and has only one dose. The exemption documentation shows that the employer (i.e. aerodrome operator, air operator, or NAV CANADA) has approved the exemption request for a specific non-passenger. For a sample of the forms, see <a href="Annex B">Annex B</a> (Medical Exemption Request Form), <a href="Annex D">Annex C</a> (Religious Exemption Request Form) or <a href="Annex D">Annex D</a> (Partially Vaccinated Exemption Request Form).

When a non-passenger presents their "Confirmation of Exemption by Employer" (issued by their employer) at the screening checkpoint as proof of an exemption (e.g., Part 2 of one of the Exemption Request Forms), CATSA or the aerodrome operator must verify that the document is complete and signed by the employer.





### **Declaration Process**

Should a non-passenger forget their documentation, they can enter the restricted area; however they must sign a declaration stating that they are fully vaccinated or that they have been granted an exemption (see Annex E for a copy of the declaration form; CATSA will also have copies). They must show their proof of vaccination or proof of exemption to the aerodrome operator within 7 days of having signed the declaration.

Each time a declaration is signed prior to entering the restricted area, the aerodrome operator must be notified, as soon as feasible, of the person's name and the number or the identifier of the person's document of entitlement.

If a non-passenger does not show their proof of vaccination or proof of exemption to the aerodrome operator within 7 days after signing a declaration, the aerodrome operator must suspend their access to the restricted area until such time that the person provides the evidence.

Records must be kept of each time that the restricted area access of a non-passenger is suspended by recording the following information:

- The person's name;
- The number or identifier of the person's document of entitlement;
- The date of the suspension; and
- The reason for the suspension.

The aerodrome operator must also:

- a) Retain the records for a period of at least 12 months after the day on which the record was created; and
- b) Make the records available to the Minister on request.

If a non-passenger refuses to sign a declaration confirming they are fully vaccinated or that they have been granted an exemption, they must be <u>denied entry</u> to the restricted area.

### **Denial of Entry to the Restricted Area**

CATSA or the aerodrome operator must deny entry into the restricted area to non-passengers who do not provide proof of vaccination, proof of exemption, or to those who fail to sign a declaration in the event they do not have their proof on them at the time of verification.

Each time entry to the restricted area is denied, the aerodrome operator must be notified, as soon as feasible, of the person's name and the number or identifier of the person's document of entitlement.

Records must be kept of each time a non-passenger was denied entry to a restricted area by recording the following information:

- a) The person's name
- b) The number or identifier of the person's document of entitlement, if applicable;





- c) The date on which the person was denied entry and the location of the denial; and
- d) The reason why the person was denied entry to the restricted area.

CATSA or the aerodrome operator must also:

- a) Retain the records for a period of at least 12 months after the day on which the record was created; and
- b) Make the records available to the Minister on request.

### **Section 4 - Oversight Mechanisms**

### **CATSA/Aerodrome Operator's Oversight Obligations**

Oversight mechanisms will be in place in order to ensure that all parties are adhering to the vaccination mandate requirements. CATSA or the aerodrome operator will be required to:

- Submit to Transport Canada upon request, their local operating procedures for random verifications to ensure only non-passengers with proof of vaccination access the restricted area, unless exempt;
- Notify the Minister within 72 hours should they have reason to believe that a nonpassenger has provided evidence that is likely to be false or misleading. The person's name and, if applicable, the number or identifier of the person's document of entitlement must be provided; and
- Ensure that a document of entitlement is only issued to a fully vaccinated person or a person who has been granted an exemption.

### **Transport Canada's Oversight Obligations**

Transport Canada will also oversee compliance by conducting inspections and applying enforcement tools, including Administrative Monetary Penalties. This will begin on November 15, 2021.

Transport Canada could inspect records upon request and review processes under the *Interim Order*. Non-passengers could be fined up to \$5,000 per violation under the *Aeronautics Act*, and employers could be fined up to \$25,000 per violation.

In addition, issuers of temporary passes who keep records attesting to the vaccination status of temporary pass holders will be subject to Transport Canada inspection of records upon request.







### Annex A – List of Specified Aerodromes in Canada

Non-passengers working at these aerodromes would be subject to the Federal Vaccine Mandate requirements.

| #  | Airport Name                                | ICAO / OACI |
|----|---|-------------|
| 1  | Abbotsford                                  | CYXX        |
| 2  | Alma  | CYTF        |
| 3  | Bagotville                                  | CYBG        |
| 4  | Baie-Comeau                                 | CYBC        |
| 5  | Bathurst                                    | CZBF        |
| 6  | Brandon                                     | CYBR        |
| 7  | Calgary International                       | CYYC        |
| 8  | Campbell River                              | CYBL        |
| 9  | Castlegar                                   | CYCG        |
| 10 | Charlo                                      | CYCL        |
| 11 | Charlottetown                               | CYYG        |
| 12 | Chibougamau/Chapais                         | CYMT        |
| 13 | Churchill Falls                             | CZUM        |
| 14 | Comox                                       | CYQQ        |
| 15 | Cranbrook                                   | CYXC        |
| 16 | Dawson Creek                                | CYDQ        |
| 17 | Deer Lake                                   | CYDF        |
| 18 | Edmonton International                      | CYEG        |
| 19 | Fort McMurray                               | CYMM        |
| 20 | Fort St. John                               | CYXJ        |
| 21 | Fredericton International                   | CYFC        |
| 22 | Gander International                        | CYQX        |
| 23 | Gaspé                                       | CYGP        |
| 24 | Goose Bay                                   | CYYR        |
| 25 | Grande Prairie                              | CYQU        |
| 26 | Greater Moncton International               | CYQM        |
| 27 | Halifax (Robert L. Stanfield International) | CYHZ        |
| 28 | Hamilton                                    | СҮНМ        |
| 29 | Îles-de-la-Madeleine                        | CYGR        |
| 30 | Iqaluit                                     | CYFB        |
| 31 | Kamloops                                    | СҮКА        |
| 32 | Kelowna                                     | CYLW        |
| 33 | Kingston                                    | CYGK        |
| 34 | Kitchener/Waterloo Regional                 | CYKF        |
| 35 | La Grande Rivière                           | CYGL        |
| 36 | Lethbridge                                  | CYQL        |
| 37 | Lloydminster                                | CYLL        |
| 38 | London                                      | CYXU        |







| #  | Airport Name  | ICAO / OACI |
|----|---|-------------|
| 39 | Lourdes-de-Blanc-Sablon                               | СҮВХ        |
| 40 | Medicine Hat  | СҮХН        |
| 41 | Mont-Joli   | CYYY        |
| 42 | Montréal-Pierre Elliott Trudeau International Airport | CYUL        |
| 43 | Nanaimo   | CYCD        |
| 44 | North Bay   | СҮҮВ        |
| 45 | Ottawa (Macdonald-Cartier International)              | CYOW        |
| 46 | Penticton   | CYYF        |
| 47 | Prince Albert   | СҮРА        |
| 48 | Prince George   | CYXS        |
| 49 | Prince Rupert   | CYPR        |
| 50 | Québec (Jean Lesage International)                    | CYQB        |
| 51 | Quesnel   | CYQZ        |
| 52 | Red Deer Regional                                     | CYQF        |
| 53 | Regina  | CYQR        |
| 54 | Rivière-Rouge (Mont- Tremblant International)         | CYFJ        |
| 55 | Rouyn-Noranda   | CYUY        |
| 56 | Saint John  | CYSJ        |
| 57 | Sarnia (Chris Hadfield)                               | CYZR        |
| 58 | Saskatoon (John G. Diefenbaker International)         | CYXE        |
| 59 | Sault Ste. Marie                                      | CYAM        |
| 60 | Sept-Îles   | CYZV        |
| 61 | Smithers  | CYYD        |
| 62 | St. Anthony   | CYAY        |
| 63 | St. John's International                              | CYYT        |
| 64 | Stephenville  | СҮЈТ        |
| 65 | Sudbury   | CYSB        |
| 66 | Sydney  | CYQY        |
| 67 | Terrace   | CYXT        |
| 68 | Thompson  | СҮТН        |
| 69 | Thunder Bay   | CYQT        |
| 70 | Timmins   | CYTS        |
| 71 | Toronto (City Centre)                                 | CYTZ        |
| 72 | Toronto (Lester B. Pearson International)             | CYYZ        |
| 73 | Toronto/Buttonville Municipal                         | CYKZ        |
| 74 | Val-d'Or  | CYVO        |
| 75 | Vancouver International                               | CYVR        |
| 76 | Victoria International                                | CYYJ        |
| 77 | Wabush  | CYWK        |
| 78 | Whitehorse International                              | CYXY        |
| 79 | Williams Lake   | CYWL        |
| 80 | Windsor   | CYQG        |





| # Airport Name |   | ICAO / OACI |
|----------------|---|-------------|
| 81             | Winnipeg (James Armstrong Richardson International) | CYWG        |
| 82             | Yellowknife   | CYZF        |









### Annex B – Medical Exemption Request Form

#### MEDICAL EXEMPTION REQUEST FORM

The person requesting a medical exemption must submit a completed copy of this form in its entirety. All pages must be reviewed and completed by the person to be exempted and/or requester, as well as the required medical doctor or nurse practitioner. The employer evaluating this request must do so in accordance with its legal duty to accommodate under the applicable legislation.

#### **PART I OF MEDICAL EXEMPTION**

| Person To Be Exempted                              |  |
|--|--|
| Please provide the following concerning the per    | rson for which a medical exemption is requested: |
| First Name:  | Last Name:                                       |
| Home Address:                                      |  |
|  |  |
| Requester's Information                            |  |
| If the requester is different than the person to b | e exempted, please complete the following:       |
| First Name:  | Last Name:                                       |
| Mailing Address:                                   |  |
|  |  |

#### **Provincial / Territorial Government**

In some cases, a provincial or territorial government may issue a credential to the effect that an individual cannot be vaccinated. The employer can accept this credential code instead of a medical doctor or nurse practitioner attestation. If this situation applies, the person requesting the exemption must select the check box below and present their provincial or territorial credential to their employer for verification.

The person requesting a medical exemption is in possession of a provincial or territorial government issued credential (e.g., QR code) confirming that the person cannot be vaccinated. The employer must verify the credential prior to granting a medical exemption.





|                      |   | Medical Statement  |  |
|----------------------|---|--|--|
| of                   |   |  |  |
|                      | a   | m a licensed Physician/Nurse Practitioner in   | the province / territory                           |
| of the follov        | I here  | eby certify that   | (indicate one                                      |
|                      | ving):  |  |  |
| BioN<br>Imm          | Trech or Moderna vaccines) bas<br>sunization (as follows based on<br>History of anaphylaxis after prev<br>Confirmed allergy to polyethyler<br>COVID-19 vaccines<br>Note that if the patient is allerg<br>Pfizer-BioNTech product) | o full vaccination against COVID-19 with mRN sed on recommendation of the National Advination of the National Advination as of September 10, 2021):  Vious administration of an mRNA COVID-19 which is found in the Pfizer-Binic to tromethamine which is found in Modernate only one) | vaccine ioNTech and Moderna                        |
|                      | <ul><li>Permanent</li><li>Time limited and will be in e</li></ul>   | effect until   |  |
| □ 2) H<br><u>Adv</u> | as a medical reason for delay of sory Committee on Immunizati  A History of myocarditis/per  Due to an immunocomprom response can be maximized medication is lower)   | f full vaccination against COVID-19 as describion (as follows based on NACI advice as of Secicarditis following the first dose of an mRNA dising condition or medication, waiting to vaccine, waiting to vaccinate when immunocome be given to benefit/risk when vaccination is        | vaccine<br>ccinate when immune<br>promised state / |
| Thi                  | s medical reason will be in effec   | t until  |  |
| belo                 | •   | full vaccination against COVID-19 (not cover lude information related to why the medical   | •  |
|                      |   |  | -  |







| This medical reason is (please indicate only one)  Permanent  Time limited and will be in effect until                    |
|---|
| Signature:  |
| Date:   |
| Name:   |
| Гelephone number:   |
| License number: Province/Territory:   |
| Requester's Attestation   |
| The following is to be completed by or on behalf of the person requesting a medical exemption:                            |
| hereby certify that I am/or the person for which a request is made is unable to be vaccinated due to a medical condition: |
| Signature: Full Name:   |
| Date: Location:   |
|   |
| False Or Misleading Information   |

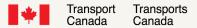
It is an offence under section 366 of the Criminal Code to make a false document, knowing it to be false.

As per the applicable *Interim Order Respecting Certain Requirements for Civil Aviation Due to COVID-19*, a person who provides information to a carrier that is known to be false or misleading may also be subject to an administrative monetary penalty or other enforcement action, including prosecution.

### **Personal Information**

Personal information you provide in this form will be used for the purposes of determining the qualification of the person identified on this form for medical exemption from the requirements of the applicable *Interim Order Respecting Certain Requirements for Civil Aviation Due to COVID-19*. This information may also be shared with Transport Canada for the sole purpose of audit or enforcement.







|                     | <br> |
|---------------------|------|
|                     |      |
| PART 2 OF EXEMPTION |      |

Important Notice: Only Part 2 of this exemption is to be provided by the employee, upon request, to the Airport Authority, the Canadian Air Transport Security Authority (CATSA) or Transport Canada. Should additional information be required by Transport Canada, a government official will contact the Employer\* directly.

| Confirmation of Exemption by<br>Employer*       |   |
|---|---|
| Employer* Record Number:                        |   |
| This is to confirm that                         | (full name of the exempted person),                             |
| RAIC/RAP/Temp pass #:                           | , has an exemption from the mandatory vaccination               |
| requirements under the Transport Canada Interim | Order Respecting Certain Requirements for Civil Aviation Due to |
| COVID-19.                                       |   |
| Signature:                                      | Full Name:  |
| Title:  | Organization:   |
| Phone number (day):                             |   |
| Date:   | Location:   |
|   |   |
|   |   |
|   |   |



<sup>\*</sup> Part 2 is to be completed by the employer or an organization responsible to validate the exemption request in accordance with the applicable airport-wide mandatory vaccination policy.



### Annex C – Religious Exemption Request Form

### **RELIGIOUS EXEMPTION REQUEST FORM**

The person requesting a religious exemption must submit a completed copy of this form in its entirety. All pages must be reviewed and completed by the person to be exempted and/or requester, as well as by the required commissioner for taking oaths. The employer evaluating this request must do so in accordance with its legal duty to accommodate under the applicable legislation.

### **PART I OF RELIGIOUS EXEMPTION**

| Person To Be Exempted  |  |                                     |
|--|--|-------------------------------------|
| Please provide the following concerning the per  | son for which a religious exemption                                      | on is requested:                    |
| First Name:  | Last Name:   |                                     |
| Home Address:  |  |                                     |
|  |  |                                     |
| Affidavit - Religious Belief   |  |                                     |
| Please provide the requested information con number of religions (e.g., Islam, Roman Can Witnesses, Christian Science) have released vaccine specifically in the interest of public  | tholicism, <u>Judaism, Greek Orth</u><br>d public statements indicating  | hodox, <u>Mennonites, Jehovah's</u> |
| Affidavit of   |  | (name)                              |
|  |  |                                     |
| l,(full n  | ame), currently employed as  | (position) at                       |
| (orga  | nization), MAKE OATH OR SOLEM  | INLY AFFIRM AND SAY AS FOLLOWS:     |
| <ol> <li>The requirements of the Vaccination Powith my sincerely held religious belief of this sincerely held religious religious belief prohibits you from recein and the religious belief or the religious belief prohibits you from recein and the religious belief or the religious belief or the religious belief prohibits you from recein and the religious belief or the religious belief or the religious belief prohibits you from recein and the religious belief or the religious belief or the religious belief prohibits you from recein and the religious belief or the religious belief prohibits you from recein and the religious belief prohibits you from recein and the religious belief prohibits you from recein and the religious belief prohibits you from the relig</li></ol> | or practice that prohibits me from us belief or practice is as follows ( | receiving the COVID-19 vaccine.     |
|  |  |                                     |





Transports Canada



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| Signatu   | re: Full Name:                                       |             |
| Date:     | Location:  |             |
| <b>_</b>  |  |             |
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| Signa     | ture of Commissioner Of Oaths                        |             |
| The follo | owing is to be completed by a commissioner of oaths: |             |
| THE JOHE  | wing is to be completed by a commissioner of outris. |             |
| SWORI     | N OR SOLEMNLY AFFIRMED before me at: (Mui            | nicipality) |
|           |  |             |
| in        | (Province, State, or Country) on                     | (Date)      |
|           |  | , ,         |
| Signatu   | re: Full Name:                                       |             |
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### **False Or Misleading Information**

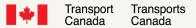
It is an offence under section 131 of the <u>Criminal Code</u> to make a false statement under oath or solemn affirmation, by affidavit, solemn declaration or deposition or orally, knowing that the statement is false. It is further an offence under section 366 of the <u>Criminal Code</u> to make a false document, knowing it to be false.

As per the applicable Interim Order Respecting Certain Requirements for Civil Aviation Due to COVID-19, a person who provides information to a carrier that is known to be false or misleading may also be subject to an administrative monetary penalty or other enforcement action, including prosecution.

### **Personal Information**

Personal information you provide in this form will be used for the purposes of determining the qualification of the person identified on this form for religious exemption from the requirements of the applicable Interim Order





Location: \_\_\_\_



Respecting Certain Requirements for Civil Aviation Due to COVID-19. This information may also be shared with Transport Canada for the sole purpose of audit or enforcement.

| PART 2 OF EXEMPTION                               | ······································                       |
|---|--|
| Authority, the Canadian Air Transport Security Au | thority (CATSA) or Transport Canada. Should additional       |
| information be required by Transport Canada, a g  | government official will contact the Employer* directly.     |
| Confirmation of Exemption by<br>Employer*         |  |
| Employer* Record Number:                          |  |
| This is to a sufficient that                      | (full pages of the account of account)                       |
|   | (full name of the exempted person),                          |
| RAIC/RAP/Temp pass #:                             | has an exemption from the mandatory                          |
| vaccination requirements under the Transport Ca   | nada Interim Order Respecting Certain Requirements for Civil |
| Aviation Due to COVID-19.                         |  |
|   |  |
| Signature:  | Full Name:   |
|   |  |
| Title:  | Organization:  |
|   |  |
| Phone number (day):                               |  |
| Date:   | _  |
| l   |  |



<sup>\*</sup> Part 2 is to be completed by the employer or an organization responsible to validate the exemption request in accordance with the applicable airport-wide mandatory vaccination policy.



### Annex D – Partially Vaccinated Exemption Request Form

### PARTIALLY VACCINATED EXEMPTION REQUEST FORM

The person must review and submit a completed copy of this form in its entirety, requesting an exemption on the ground that they have received a first vaccine dose **PRIOR** to November 15, 2021 and are waiting to receive the second. Alternatively, the person requesting the exemption may have had their final dose but has not yet completed the 14 days period in order to be considered fully vaccinated prior to November 15, 2021. The employer evaluating this request must do so in accordance with its legal duty to accommodate under the applicable legislation.

#### PART I OF FIRST DOSE EXEMPTION

| Person To Be Exempted                               |  |
|---|--|
| Please provide the following concerning the per     | son for which the exemption is requested:                      |
| First Name:   | Last Name:   |
| Home Address:                                       |  |
|   |  |
|   |  |
|   |  |
| Vaccine Doses                                       |  |
|   | rning the vaccine doses you have received to-date and that you |
| •   | econd vaccine dose must be received no later than January 24,  |
| 2022, and the failure to do so will result in the s | uspension of your Restricted Area Identity Cara.               |
| Date of first vaccine dose received:                |  |
| Anticipated (or actual) date of second vacci        | ne dose:   |
| Expected date of being fully vaccinated (14         | days after final dose):  |
|   |  |
|   |  |

### **False Or Misleading Information**

It is an offence under section 366 of the *Criminal Code* to make a false document, knowing it to be false.

As per the applicable Interim Order Respecting Certain Requirements for Civil Aviation Due to COVID-19, a person who provides information to a carrier that is known to be false or misleading may also be subject to an administrative monetary penalty or other enforcement action, including prosecution.







#### **Personal Information**

Confirmation of Exemption by

Personal information you provide in this form will be used for the purposes of determining the qualification of the person identified on this form for exemption from the requirements of the Interim Order Respecting Certain Requirements for Civil Aviation Due to COVID-19 on the ground that they have received a first vaccine dose and are awaiting the second. This information may also be shared with Transport Canada for the sole purpose of audit or enforcement.

| • |  |
|---|--|
|   |  |

#### **PART 2 OF EXEMPTION**

Important Notice: Only Part 2 of this exemption is to be provided by the employee, upon request, to the Airport Authority, the Canadian Air Transport Security Authority (CATSA) or Transport Canada. Should additional information be required by Transport Canada, a government official will contact the Employer\* directly.

| Employer*                                       |  |
|---|--|
| Employer* Record Number:                        |  |
| This is to confirm that                         | (full name of the exempted person),                                |
| RAIC/RAP/Temp pass #:                           | , has an exemption from the mandatory                              |
| vaccination requirements on the ground that the | y have received a first dose and is waiting to receive the second. |
| Signature:                                      | Full Name:   |
| Title:  | _ Organisation:  |
| Phone number (day):                             |  |
| Date:   | Location:  |



<sup>\*</sup> Part 2 is to be completed by the employer or an organization responsible to validate the exemption request in accordance with the applicable airport-wide mandatory vaccination policy.



### Annex E – Non-Passenger Declaration Form

| Date                                     | Airport code Checkp                                | point  |
|--|--|--|
| r signing this, you<br>emption letter to | are acknowledging that<br>the airport authority or | at you have <b>7 days</b> to show your proof of vaccination or ryour RAIC will be suspended. |
| ime (HH:MM)                              | RAIC Number  | Signature  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Forms must be submitted to the airport authority at the end of the shift or day.

UNAUTHORIZED DISCLOSURE PROHIBITED 0F3-01-04TOP000: 2021-10-19



