



# Access and Inclusion Services

## Medical Rapid Testing Accommodation Request

Please review the instructions on page 3.

In special circumstances students may be considered for a rapid testing accommodation. To be considered for a rapid test accommodation, the student's medical condition must be clearly connected to the requirement for a rapid test accommodation. A rapid test accommodation may not be possible in all situations, and it may depend on public health guidelines and/or specific agency or MRU requirements.

All relevant sections must be completed by the appropriate certifying professional – physician, nurse practitioner or psychologist

### SECTION 1 – Personal Information – Please print

Name of Student: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle Initial) \_\_\_\_\_

Client's Date of Birth (day/month/year) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

### SECTION 2 – Documentation of Medical Background

1) Does this student experience a significant medical condition that prevents them from being able to do a rapid test for COVID-19?

YES

NO

If yes, are there other constraints to be considered with respect to the COVID-19 rapid test?

---

---

---

---

---

2) Please provide detailed information about how the student's medical condition necessitates a rapid test accommodation (what is the direct link between the student's medical condition and them not being able to do a COVID-19 rapid test. Please provide as much detail as possible. Should the information provided not be sufficient, the student may not be granted a rapid test accommodation.

---

---

---

---

---

**SECTION 3 - Certifying Professional Information**

By signing below, I confirm that I am one of the following authorized health professionals:

Physician \_\_\_\_\_ Nurse Practitioner \_\_\_\_\_ Psychologist \_\_\_\_\_

Name of Certifying Professional \_\_\_\_\_

Registration / Certificate # \_\_\_\_\_

Clinic / Agency Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Prov \_\_\_\_\_ PC \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_

Date Signed \_\_\_\_\_ (day/month/year)

**Freedom of Information and Protection of Privacy**

The personal information that you provide to Mount Royal University is collected under the authority of the Post-Secondary Learning Act and the Freedom of Information and Protection of Privacy (FOIP) Act – Section 33(c). The information will be used for the purpose of accommodation. Collected personal information is protected from unauthorized access, collection, use, and disclosure in accordance with the FOIP Act and can be reviewed upon request subject to the provisions under the Act. Questions regarding the collection of personal information can be directed to: Access and Inclusion Services 403.440.6868 accessibility@mtroyal.ca website: <https://www.mtroyal.ca/AccessibilityServices>

Y201 Mount Royal University 4825 Mount Royal Gate SW – Calgary, Alberta – T3E 6K6

## **Medical Rapid testing accommodation request instructions:**

This form is to accompany a request for a rapid test accommodation. It is understood by all parties concerned that this information will be kept strictly confidential, and will not be used for any other purpose.

### Instructions for Student:

The MRU Access and Inclusion Services Medical Rapid Test Accommodation Request form is the only type of documentation that will be accepted for consideration of a rapid test exemption.

1. It is the student's responsibility to have the MRU Access and Inclusion Services Medical Rapid Test Accommodation Request form completed by one of the professionals listed on the form.
2. Submit a "public request" form on the Access and Inclusion website and upload the completed "Medical Rapid Test Accommodation Request form"
3. An Access Advisor will review the form and contact you if further information is required.
4. If your request is accepted, you will receive an email with your accommodation letter.
5. If you do not feel that your request for accommodation has been dealt with appropriately, you may take the matter forward to the Executive Director of Students (or designate) within five (5) days of receipt of the decision from the Access Advisor.