

Eastport-South Manor Central School District

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MASKS - Staff Healthcare Provider Letter

Staff Member's Name: _____

Date: _____

School/Building: _____

Title: _____

Masks COVID-19

Face coverings are intended to protect other people in case the wearer is unknowingly infected but does not have symptoms. All students and staff are required to wear face coverings: (i) whenever they are within 6 feet of someone, (ii) in hallways, (iii) in restrooms, and (iv) in other congregate settings, including buses.

If any staff member believes that they have a medical issue that prohibits them from wearing a face covering, their healthcare provider must provide written documentation to the district clarifying why their medical condition prohibits them from wearing a mask and for what specific periods of time. Please have your healthcare provider respond to the following questions:

Can the individual tolerate wearing a face covering for any period of time? If so, how long?

Can the individual tolerate wearing a face covering when they are within 6 feet of someone?

Can the individual tolerate wearing a face covering when they are passing through hallways?

Can the individual tolerate wearing a face covering when they are using the restroom?

Can the individual tolerate wearing a face covering in congregate settings?

Additional Information provided by physician:

Name of Physician: _____

Signature of Physician: _____

Phone Number of Physician: _____

Upon receipt of a note from a physician providing answers to these questions, the district will arrange for a time to meet with the staff member to consider their medical documentation and to determine what accommodations can be provided, if any, to enable them to perform the essential functions of their job without having to wear a face mask.

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