



**DEPARTMENT OF THE AIR FORCE
HEADQUARTERS UNITED STATES AIR FORCE
WASHINGTON, DC**

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MEMORANDUM FOR ALMAJCOM-FLDCOM-FOA-DRU/CC
DISTRIBUTION C

FROM: AF/A1

SUBJECT: Updated DAF Civilian Employee Mandatory COVID-19 Vaccination Guidance

- References: (a) Under Secretary of Defense for Personnel and Readiness, *Force Health Protection Guidance (Supplement 23) Revision 3 - Department of Defense Guidance for Coronavirus Disease 2019 Vaccination Attestation, Screening Testing, and Vaccination Verification*, December 20, 2021
- (b) Secretary of the Air Force, *Delegation of Authority for Deciding Exemptions for Mandatory Coronavirus Disease 2019 Vaccination of Department of Air Force Employees*, November 3, 2021

Department of the Air Force (DAF) policy for Coronavirus Disease 2019 (COVID-19) vaccination attestation, screening testing, and vaccination verification has been updated pursuant to references (a) and (b). The attached document provides detailed guidance for implementing DAF policy and should be implemented and widely distributed. The changes from previous revisions are shown in red text.

Please direct all questions and concerns to my point of contact for this issue, Mr. Scott Stoner, (HQ AF/A1CP) at (202)716-1943, or email: scott.stoner.2@us.af.mil.

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Attachment:
DAF Civilian Employee Mandatory COVID-19 Vaccination Guide Revision 2



Department of Air Force
Civilian Force Management Directorate
AF/A1C
22 October 2021
Revision 2 Issued on 14 January 2022

DAF CIVILIAN EMPLOYEE MANDATORY COVID-19 VACCINATION GUIDE

This document provides information and guidance for commanders, supervisors, managers, and civilian employees concerning the Department of the Air Force (DAF), to include Space Force, **implementation of Force Health Protection (FHP) Guidance (Supplement 23) Revision 3 (reference (a))** and workplace safety measures directed by the White House Safer Federal Workforce Task Force (reference (b)) to reduce the transmission of the virus that causes Corona Virus Disease 2019 (COVID-19) and its implications for DAF civilian personnel.

This document replaces the guidance in HAF/A1C Message #2021-0008 (including Updates #1 and 2). This guidance applies to all DAF civilian employees, regardless of whether they participate in telework or remote work, (including employees paid from non-appropriated funds). It also applies to DAF contractor personnel, (defined for this purpose as those individuals issued a credential by the Department of Defense (DoD) that affords the individual recurring access to DoD facilities, classified herein as "credentialed recurring access" (CRA) (e.g., Common Access Cardholders), and to non-DoD individuals seeking access, one time or recurring, in association with the performance of official DoD business classified herein as "official visitors" (e.g., to attend a meeting or official event or conduct authorized volunteer activities), but who do not have CRA. For purposes of this guidance, "DAF civilian employee" includes foreign nationals employed by DAF outside the United States, to the maximum extent possible while respecting host nation agreements and laws. Service members who are not on active duty and who also are DAF civilian employees or contractor personnel must follow the applicable requirements in this memorandum for DAF civilian employees or DAF contractor personnel. These vaccination and physical access requirements outlined herein do not apply to personnel receiving ad hoc access to DoD facilities (e.g. delivery personnel, taxi services); to individuals who have access to the grounds of, but not into the buildings on, DoD installations (e.g., contract groundskeepers, fuel delivery personnel, household goods transportation personnel); to personnel accessing DoD buildings unrelated to the performance of DoD business (e.g., residential housing); or to personnel accessing DoD facilities to receive a public benefit (e.g., commissary; exchange; public museum; air show; military treatment facility; morale, welfare, and recreation resources).

Individuals *other than* visitors seeking access to facilities located on DAF installations but operated by other Federal Departments and Agencies will also follow the policies and procedures of that Department or Agency. Visitors will follow applicable policies and procedures of both DAF and the Department or Agency they are visiting. Subsequent guidance will be issued as necessary to assure a continuous, adaptive and aggressive response to implementing these new measures combating the COVID-19 pandemic. Additional guidance related to DAF contractor personnel may be released under separate cover.

References can be found in the Appendix of this guidance. Reference (p) is hereby rescinded. Additional guidance regarding assessing exemption requests and the function of the DASO/ERT SMEs will be issued under separate cover.

1. GENERAL DISCUSSION

In accordance with references (b), (c), (d), (q), and (t), DAF civilian employees were required to be fully vaccinated against COVID-19 by November 22, 2021, subject to exemptions as required by law. Additionally, DAF contractor personnel and official visitors must attest to being fully vaccinated, and if not fully vaccinated, present the results of a recent (within the previous 72 hours) negative COVID-19 test as a condition of physical access to DoD buildings and DoD-leased or controlled spaces in non-DoD buildings in which official DoD business takes place (referred to in this memorandum as “DoD facilities”).

For purposes of this guidance, a DoD installation is a base, camp, post, station, yard, center, homeport facility for any ship, or other area under the jurisdiction of the Secretary of a Military Department or the Secretary of Defense, including any leased location, or in the case of an activity in a foreign country, any area under the operational control of the Secretary of a Military Department or the Secretary of Defense, without regard to the duration of operational control. Official government events and events held in space leased or rented by the government are subject to the provisions of this guidance.

DAF Commanders will continue taking steps to ensure their DAF civilian employees are fully vaccinated as quickly as possible. Commanders will issue any necessary supplemental instructions and ensure that all contract and associated funding implications are considered.

1.1. Labor Relations

Commanders should engage with DAF civilian employee unions as they develop their local implementation plans and procedures, and otherwise satisfy any applicable collective bargaining obligations under the law at the earliest convenience, including on a post-implementation basis. It must be noted that COVID-19 certification of vaccination requirements and associated procedures are being established in response to a national emergency; therefore, post-implementation bargaining may be appropriate based on the need to protect the health and safety of the workforce under the current emergency.

1.2. Appropriate Handling & Protection of Medical and Religious Information

Under the authority of reference (a), DAF may collect and maintain sensitive and private information about DAF civilian employees, including medical information. Additionally, consistent with the Religious Freedom Restoration Act of 1993, 42 U.S.C. § 2000bb et seq., and Title VII of the Civil Rights Act, 42 U.S.C. § 2000e et seq., DAF civilian employees and joint DoD/Federal contractor employees seeking a religious exemption from these requirements will submit to DAF supporting information about their religious beliefs and practices in order for DoD to evaluate the exemption request. In accordance with Attachment 9 of reference (a), medical and other information collected from individuals, including vaccination information and documentation, COVID-19 test results, medical and/or religious information supporting exemption requests, will be treated in accordance with applicable laws and policies on privacy, including the Rehabilitation Act of 1973, as amended (“Rehabilitation Act”), the Privacy Act of 1974 and DoDI 5400.11, “DoD Privacy and Civil Liberties Programs,” January 29, 2019 (reference (n)), 5 U.S.C. § 552a, 29 U.S.C. § 791 et seq., and 5 C.F.R. part 293, subpart E. While such information may be sensitive and is to be safeguarded as described above, it is not covered by the Health Insurance Portability and Accountability Act (HIPAA) regulations found at 45 CFR parts 160, 162, and 164, and as implemented in DoDI 6025.18 “Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule Compliance in

DoD Health Care Programs,” and DoD Manual 6025.18, “Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule in DoD Health Care Programs.” Information obtained from DAF civilian employees, including vaccination status, will be accessible only to authorized DAF personnel who have a need to access the information under the Rehabilitation Act of 1973, as amended, including immediate supervisors, authorized human resources officials, **designated decision makers, and where necessary subject matter experts**, who must access the information to implement this guidance. The Rehabilitation Act’s requirements on confidentiality of medical information apply whether or not an employee has a disability. Commanders are advised to consult with the DAF Privacy Office and servicing legal office if there is a need to share this information with DoD personnel other than **those outlined herein**, or individuals outside of DoD. DAF personnel will use appropriate safeguards in handling and storing DAF civilian employee medical information, including an employee’s proof of vaccination, the DD Form 3175, and COVID-19 test results. Appropriate safeguards may include encrypting emails and electronic files, and role-based access to electronic storage environments where this information is maintained. In the event the information is maintained in paper form, supervisors and other authorized DAF personnel must ensure DAF civilian employee medical information remains confidential and is maintained separately from other personnel files (e.g., stored in a separate, sealed envelope marked as confidential employee medical information and maintained in locked file cabinets or a secured room). Commanders are advised to refer to applicable DAF guidance on the handling and storage of DAF civilian employee medical records, as well as the guidance herein, and to consult the DAF Privacy Office as needed for further guidance.

2. VACCINATING THE CIVILIAN WORKFORCE

Mandatory COVID-19 vaccination of DAF personnel with Food and Drug Administration (FDA) licensed or authorized for emergency use COVID-19 vaccines reduces potential national security risks resulting from a degraded workforce. **All DAF civilian employees must be fully vaccinated against COVID-19**, subject to exceptions as required by law (reference (c)) such as those limited circumstances where an employee is legally entitled to an accommodation based on medical condition or disability or sincerely held religious beliefs. **DAF civilian employees who are actively participating in COVID-19 vaccine clinical trials begun prior to November 22, 2021, are exempted from mandatory vaccination against COVID-19 until the trial is complete in order to avoid invalidating such clinical trial results.**

Commanders and supervisors must immediately ensure that all DAF civilian employees who are not currently fully vaccinated (as defined herein) are directed (i.e. ordered), in writing, to meet the requirement to be fully vaccinated. (See sample COVID-19 Vaccination Mandate Directive Memorandum, Attachment 1.)

2.1. Vaccination Deadlines

As was noted in DoD guidance, dated 1 October 2021, and SecAF guidance, dated 8 October 2021, in order to **be in compliance with the directive to have been** fully vaccinated by November 22, 2021, the following intermediate deadlines **were established** (for those most commonly used vaccines):

- October 11, 2021 – First dose deadline for employees getting Moderna vaccine;
- October 18, 2021 – First dose deadline for employees getting Pfizer-BioNTech/Comirnaty vaccine;
- November 8, 2021 – Second dose deadline for both Moderna and Pfizer-BioNTech/Comirnaty vaccines; also first (only) dose deadline for employees getting Johnson&Johnson/Janssen vaccine;
- November 22, 2021 – Deadline by which DAF civilian employees must **have been** fully vaccinated, as defined in this guidance, including those who opt to use an authorized vaccine other than those listed above.

- By start date – All new DAF civilian employees must be fully vaccinated no later than their start date, unless a temporary exemption to this requirement for new hires is granted by SecAF (or designee) in accordance with this guidance.

Commanders must continue to follow applicable Force Health Protection guidance and implement/use all available mitigation strategies (e.g., maximizing telework, mask wear, physical distancing, screening testing, etc.), and continue to protect vulnerable populations, in order to protect the Total Force and our families.

2.2. Obtaining Vaccinations

This requirement can be met by using: any vaccine that is either fully licensed or authorized for emergency use by the FDA (e.g., Comirnaty/Pfizer-BioNTech, Moderna, Johnson & Johnson/Janssen); a recommended dose series of COVID-19 vaccines authorized for emergency use by the World Health Organization (WHO) (e.g., AstraZeneca/Oxford); or vaccine approved for use in a clinical trial for which vaccine efficacy has been independently confirmed (e.g., Novavax). To the extent possible, individuals are encouraged to return to the same location for their second COVID-19 vaccine dose (and any subsequent booster), as applicable, in accordance with the vaccine's dosing timing requirements according to the FDA.

DAF civilian employees are eligible to receive the COVID-19 vaccine at any DoD vaccination site, including military medical treatment facilities. DAF civilian employees and contractor personnel are not *required* to receive vaccinations at their worksites. DAF civilian employees may *opt* to obtain COVID-19 vaccination through private providers, including locations such as retail stores, private medical practices, and/or local and State public health department sites. If vaccination is offered to a DAF civilian employee through a DoD source at no cost to the employee, then the employee will not be eligible for reimbursement of the cost to get vaccinated if they opt to do so through their private provider.

Follow-on care (other than the administration of a second vaccine dose and/or booster dose) will be provided through DAF civilian employees' existing health care plans or personal health care providers. If a vaccine that is either fully-FDA-approved or has an FDA EUA is not available at a DAF vaccination site, the employee should be directed to another nearby DoD vaccination site, or to a vaccination site in the community (Federal, State and local government organizations, or private health care organizations, pharmacies, retail stores, etc) that has either fully-FDA-approved vaccine or has an FDA EUA vaccine available. In such cases, employees would be eligible for reimbursement of the cost to get vaccinated, to include travel expenses (local or tdy) in accordance with applicable travel reimbursement policies.

2.3. Leave and Timekeeping

Official duty time will be granted (including time spent traveling to/from the vaccination location and any waiting time) to DAF civilian employees for the purpose of receiving **mandated** COVID-19 vaccination doses from DoD, Federal, State and local government organizations, or private health care organizations, pharmacies, retail stores, etc. Regardless of whether they accept an offer to get vaccinated through the DoD or obtain the vaccination through private providers, DAF civilian employees shall receive the duty time necessary to obtain the **mandated** vaccination, generally up to 4 hours per vaccination event; thus, there is no need for employees to take administrative leave for such time during the employee's basic tour of duty. DAF civilian employees should NOT be charged personal leave, shall not be credited with administrative leave, and other statuses (such as weather/safety leave) are not appropriate for the employee's time spent getting their **mandated** vaccination. If, due to unforeseen circumstances, a DAF civilian employee is unable to obtain vaccination during their basic tour of duty hours **In Accordance With (IWA) DoDI 1400.25V610_AFI 36-807 and normal overtime hours of work IAW DoDI 1400.25V550_AFI 36-808**. Duty time is currently not appropriate for DAF civilian employee COVID-19 vaccine booster shots; however, up to four hours of administrative leave will be granted for the purpose of an employee receiving (or for an employee to accompany a family member who is receiving) an authorized booster shot. **If COVID-19 vaccine booster shots become mandatory in the future, duty time would then be appropriate.**

DAF civilian employees who experience an adverse reaction to a COVID-19 vaccination that prevents the employee from working will be granted no more than two workdays of administrative leave for recovery associated with a single vaccination dose. If a DAF civilian employee requests more than two workdays to recover, other appropriate leave (e.g. sick leave) may be granted to cover the additional absence. This policy on granting administrative leave is specific to the current COVID-19 pandemic situation and is designed to support the DAF mission by promoting the health and safety of the DAF workforce. Facilitating vaccination will minimize the administrative burdens of addressing noncompliance with the vaccine requirement. DAF civilian employees should use the time and attendance code for “physical fitness” to record administrative leave for COVID-19 vaccination recovery time due to an adverse reaction from their vaccination that prevents them from working, or for taking a family member to be vaccinated for COVID-19. The type hour code is “LN” and the environmental /hazard/other code is “PF”. DAF Non-appropriated fund employees should code administrative leave for these scenarios in a way that can be easily reported.

DAF civilian employees who believe they have experienced a work-related illness or injury should refer to the section of this guidance titled “**12. WORKERS’ COMPENSATION CLAIMS**” for additional information.

Administrative leave is also authorized for DAF civilian employees to take a family member to get a COVID-19 vaccination, up to four hours per vaccination event. The administrative leave authorization to accompany a family member includes the time spent traveling to and from the vaccination location, and the time at the vaccination location.

For purposes of acting on a request for administrative leave for recovery, supervisors may ask DAF civilian employees about the time and location of the vaccination event and whether the employee experienced a reaction to the vaccine requiring a period of recovery. Supervisors may also require supporting medical documentation, in accordance with applicable leave policies and labor agreements.

DAF civilian employees must coordinate with their supervisor regarding when to take the time off needed to obtain the vaccine so that it does not conflict with critical mission accomplishment or important work center requirements.

For COVID-19 vaccination purposes, a “family member” is an individual who meets the definition of that term in OPM’s leave regulations (see 5 CFR 630.201).

2.4. New Hires

In accordance with reference (f), new DAF civilian employees must be fully vaccinated by their entry on duty (start) date. If a new hire wishes to request an exemption, their start date should be delayed until the exemption process is complete and they have either been approved for an exemption or they are fully vaccinated. For new hire candidates with start dates prior to November 22, 2021, the local hiring official in coordination with the servicing Civilian Personnel office may **have delayed** the start date pending confirmation that the new hire is fully vaccinated. Temporary exemptions in writing for up to 60 days after an employee’s start date may be approved by SecAF (and may be delegated no lower than the Under Secretary of the Air Force), for urgent, mission-critical hiring needs in circumstances in which an employee could not have been fully vaccinated between the time the job announcement closes and the employee’s start date. Commanders may request SecAF (or designee) approval of such temporary exemptions of this requirement, and requests should be submitted through the MAJCOM/FLDCOM chain of command to haf-es.workflow@us.af.mil. [Note: Such temporary exemptions do NOT cover any official

travel associated with the on-boarding of the employee; such official travel would require separate approval in accordance with section 10 of this guidance.]

Job opportunity announcements and tentative and final offer letters must address the COVID-19 vaccination requirement. For hiring actions currently underway, hiring organizations must issue revised tentative and final offer letters. Sample language can be found in reference (f). For purposes of paragraph 2.4, the term “new hire” includes current DAF civilian employees who are being hired into a new or different position, to include internal placement actions (i.e. reassignment, promotion, change to lower grade, and conversions).

3. FORCE HEALTH PROTECTION AND WORKPLACE SAFETY MEASURES

In accordance with current Force Health Protection guidance, all DAF civilian employees and Federal contractors will adhere to current force health protection guidance regarding mask-wearing, physical distancing, screening testing, and possible travel restrictions, and any appropriate additional measures, based on the following community transmission level¹ and vaccination status:

- In areas with low to moderate community transmission levels, fully vaccinated individuals are not currently required to wear a mask or maintain physical distance; individuals who are not fully vaccinated ARE required to wear a mask and maintain physical distance at all times.
- In areas with high to substantial community transmission levels, fully vaccinated individuals are required to wear a mask inside, but physical distancing is not currently required; individuals who are not fully vaccinated are required to wear a mask and maintain physical distance at all times.

DAF civilian employees who are not fully vaccinated, including those who have medical or religious-based exemptions approved or pending, must comply with all DAF requirements for individuals who are not fully vaccinated, including requirements related to masking, physical distancing, and travel, in accordance with references (a) and (s). In addition, if not fully vaccinated by 22 November 2021, DAF civilian employees may be subject to disciplinary action, as further addressed in the section herein titled “**ENFORCEMENT OF DAF CIVILIAN EMPLOYEE COVID-19 VACCINATION REQUIREMENT.**” DAF civilian employees who are not fully vaccinated are also subject to mandatory COVID-19 screening testing at least weekly, as set forth in Attachment 7 of reference (a) and this guidance, after November 22, 2021. Requirements regarding screening testing are addressed in the section titled “**COVID-19 SCREENING TESTING REQUIREMENTS**” below. Information regarding travel is addressed in the section titled “**TRAVEL AND MEETINGS**” below.

Mask wear and physical distancing requirements do not apply to personnel while working in their homes (teleworking/remote working).

4. DETERMINING AND VERIFYING VACCINATION STATUS

Given the different force health protection measures for individuals who are fully vaccinated and those who are not, DAF commanders and supervisors need to ask about the vaccination status of DAF civilian employees. Supervisors have responsibility for front-line implementation of workplace safety measures and therefore need information regarding their DAF civilian employee’s vaccination status. Likewise, unit Commanders have responsibility for implementing this guidance and establishing and monitoring Force Health Protection guidelines and workplace safety measures and therefore also need this information for DAF civilian employees in their units. For purposes of the requirements herein, “supervisor” includes authorized human resources officials.

¹ As determined by the Center for Disease Control and Prevention (CDC), available at <https://covid.cdc.gov/covid-data-tracker/>.

The DAF will obtain civilian vaccination status via the DD Form 3175 and accompanying vaccination documents as proof of their status. All DAF civilian employees (regardless of whether they are authorized to telework or perform remote work), **must attest to their vaccination status by completing Section A of the DD Form 3175 “Civilian Employee Certification of Vaccination,” (Attachment 3 of reference (a)) and must provide accompanying vaccination documents as proof of their status.** The form completion process includes the submission of vaccination proof documents and supervisory verification of vaccination status. Completion of the DD Form 3175 is required even if a DAF civilian employee already completed the DD Form 3150 or otherwise previously attested to their vaccination status.

Documentation to prove vaccination status may include (in accordance with references (b) and (c)):

- Copy of record of immunization from a health care provider or pharmacy; or
- Copy of COVID-19 Vaccination Record Card (CDC Form MLS-319813_r, published on September 3, 2020); or
- Copy of medical records documenting the vaccination; or
- Copy of immunization records from a public health or state immunization information system; or
- Copy of any other administratively acceptable official documentation containing the required data points for supervisory verification.

Administratively acceptable documentation must be identifiable to the employee (i.e., contain their name) and must contain the following required data points, which the supervisor must verify:

- Type of vaccine administered;
- Number of doses received;
- Date(s) of administration; and
- Name of the health care professional(s) or clinic site(s) administering the vaccine(s).

Proof of vaccination may be submitted in hard copy form or in an electronic format, and the proof may be a photocopy or photograph of the vaccination record, provided that it clearly and legibly displays the required data points listed above. Any format submitted must be capable of being retained by management.

DAF civilian employees with access to milConnect will complete the DD Form 3175 via milConnect at: <https://milconnect.dmdc.osd.mil/> (User Guides for the Electronic DD Forms 3175 and 3150 can be found in Attachment 2). If milConnect is not available, hard copy form completion is acceptable, as well as “batch” uploading of information from hard copy forms (when this function is made available), and/or uploading by supervisors or authorized Human Resources officials, **provided a hard-copy, employee-signed form is submitted by the employee.** DAF civilian employees using a hard copy form will provide the hard copy to the supervisor and those hard copies will be maintained in accordance with this guidance. DAF civilian employees cannot be required to use their own personal equipment (e.g., their cell phones) for the purpose of providing proof documents or completing the DD Form 3175 (although they may do so voluntarily). DAF civilian employees who submit proof of vaccination or the DD Form 3175 in an electronic format are encouraged to use encrypted email or password protected files with DoD SAFE file transfer (<https://safe.apps.mil/>). The DD Form 3175 includes the required Privacy Act statement that the supervisor must provide the employee at the time they submit the form.

Regardless of how the DD Form 3175 is completed, vaccination proof documents must be submitted for verification of vaccination status. DAF civilian employees who have already completed the dose series required for the type of vaccine received must provide the proof of vaccination to their supervisors. DAF civilian employees who are not yet fully vaccinated must provide proof of vaccination **upon receipt of**

each required dose.

Unit commanders, or their civilian equivalents, will establish a dedicated, unit-level file solely for the purpose of maintaining any submitted hard-copy DD Forms 3175 and accompanying proof documents. (If the form is completed electronically in milConnect by the employee, a hard copy of the form **will not be required or maintained.**) Any hard copy DD Forms 3175 **provided (because the employee did not utilize milConnect)** will be maintained in the unit file established for this purpose, and no other personnel- or medical-related documentation of any kind (including test results, medical exemptions, etc) will be kept in this file. DD Forms 3175 and associated vaccination proof documents are not to be maintained in individual supervisory files, including the Supervisor's Employee Work Folder. The completed DD Form 3175 will be treated as a medical record for confidentiality purposes. Maintenance of and access to completed DD Forms 3175 will be in accordance with applicable law and policy, including appropriate privacy protection measures. The completed DD Form 3175, or any similar vaccination record, constitutes confidential medical information under Federal law and thus must be kept confidential in a file separate from the personnel files maintained by the employee's supervisor and the civilian personnel office.

Unit commanders and supervisors **are responsible for establishment and enforcement of** deadlines for DAF civilian employees to submit their DD Forms 3175, ensuring that all required forms and vaccination proof documents are submitted and verified and that all employees **comply with the requirements** herein. Mandatory screening testing **is now in effect for any employee who is not fully vaccinated and such testing must be** implemented as soon as testing resources are available.

All DAF civilian employees will be required to complete the Civilian Employee Certification of Vaccination Form and be fully vaccinated, regardless of work location or telework status. Even in those limited circumstances where an employee has a vaccination exemption request approved, or one is still pending, the employee is still required to complete the DD Form 3175.

Completing the DD Form 3175 is mandatory, including the DAF civilian employee providing their name, DoD ID number, selecting the applicable vaccination status options, as well as signing and dating the form and providing the associated documentation as proof of vaccination status. In addition to verifying that a DAF civilian employee's proof of vaccination includes the required data points, supervisors will also complete Section B on the form to verify the employee's vaccination status, accessing and maintaining the form in accordance with applicable laws and policy, including appropriate privacy protection measures. Supervisors with access to milConnect (<https://milconnect.dmdc.osd.mil/>) **will complete Section B of the DD Forms 3175 via milConnect** using the DAF civilian employee's Employee Identification Number; otherwise use of a hard copy is acceptable. (For hard copy use, the form may be accessed at <https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd3175.pdf>.) Batch uploading of supervisory verification information (Section B data) can only be used for those records where the DAF civilian employee information (Section A data) was batch uploaded.

The DD Form 3175 incorporates the requirement that individuals certify under penalty of perjury that the information they are submitting is true and correct. Those limited circumstances where a DAF civilian employee is legally entitled to an exemption (or while an exemption request is pending) from the vaccination requirement as an accommodation based on disability or religious beliefs will result in the employee being regarded as not-fully-vaccinated for purposes of implementing safety measures, including with respect to mask-wearing, physical distancing, testing requirements, travel restrictions, quarantine periods, and potential restrictions on access to DoD facilities.

Individuals must complete a new Civilian Employee Certification of Vaccination Form (by updating their

electronic form in milConnect or completing a new hard copy form) and submit appropriate accompanying documentation, if their vaccination status changes.

An individual will be considered “fully vaccinated” when:

- at least 2 weeks have elapsed after a second dose in a 2-dose COVID-19 vaccine series, such as the Pfizer-BioNTech/Comirnaty or Moderna COVID-19 vaccines; or at least 2 weeks have elapsed after receiving a single-dose of a one-dose COVID-19 vaccine, such as Johnson & Johnson/Janssen COVID-19 vaccine. Individuals must be vaccinated with vaccines that are either fully licensed or authorized for emergency use by the FDA; or
- they have completed the recommended dose series of COVID-19 vaccines listed for emergency use on the World Health Organization (WHO) Emergency Use Listing (e.g., AstraZeneca/Oxford); or
- they are a participant in a clinical trial from a U.S. site who is documented to have received the full series of an “active” (not placebo) COVID-19 vaccine candidate, for which efficacy has been independently confirmed, 2 weeks after they complete the vaccine series. Currently, the Novavax COVID-19 vaccine meets these criteria.

“Not fully vaccinated” is defined as an individual who either:

- has not completed the full COVID-19 vaccination dose series; or
- has not completed the 2 week period following the final dose in a vaccination series; or
- has not attested to and validated their COVID-19 vaccination status.

Those with previous COVID-19 infection(s) or antibody test results are not considered fully vaccinated on that basis for the purposes of this guidance.

Knowingly and willfully providing false statements on an official form can be punishable under 18 U.S.C. 1001, as well as under other applicable DAF policies that can result in administrative action including adverse personnel action up to and including removal from federal employment and loss of security clearance eligibility.

5. COVID-19 SCREENING TESTING REQUIREMENTS

When screening testing is made available and local testing procedures are established (on or after November 23, 2021), DAF civilian employees and contractor personnel who are not fully vaccinated (as defined in this guidance), are required to undergo COVID-19 screening testing. This requirement also applies to local foreign national employees and Service members who are not on active duty who are also DAF civilian employees.

If DAF civilian employees and Federal contractor personnel are not fully vaccinated and refuse required screening testing, Commanders may deny them access to DoD facilities. If the employee is not denied access, (i.e., they are directed to continue working) the Commander and/or supervisor must ensure appropriate mitigation measures are established to ensure the health and safety of others. Information on mitigation measures for DAF civilian employees and Federal contractor personnel is located on the Safer Federal Workforce website (<https://www.saferfederalworkforce.gov/overview/>). DAF civilian employees who refuse **screening testing may be subject to corrective personnel action.**

DAF provided COVID-19 screening testing will be executed by DAF using COVID-19 self-collection kits or self-tests that have been authorized or approved by the FDA, in accordance with Attachment 8 of reference (a). For unit/work center testing, **only the FDA approved (EUA or full FDA approved) Over-The-Counter (OTC) test kits may be used.** When DAF does not provide test kits, Host Nation employees may utilize Host Nation FDA-equivalent approved test kits.

The COVID-19 screening test result must be negative for the individual to access their worksite or otherwise be granted entry into a DoD facility. **Whether conducted on-site or off-site**, the negative test result must be from a test performed within the preceding 72 hours. If the negative test result is more than 72 hours old, a new test is required. **DoD civilian employees and Federal contractor personnel with CRA who have positive COVID-19 screening tests will be required to remain away from the workplace in accordance with Force Health Protection Supplement 23 Revision 3 references (l) and (m).**

Commanders will determine the appropriate manner to execute the DAF screening testing requirement with a locally established testing process using COVID-19 self-collection kits or self-tests that can be performed primarily on-site at the installation or facility with proper supervision (non-medical) and documentation of testing results, in accordance with Attachment 7 of reference (a). If on-site COVID-19 screening testing is not feasible, as an alternative, the self-testing can be performed at home or in other locations. (Note: these COVID-19 self-tests do not require a health care provider's clinical care order and are, therefore, considered an OTC test and do not require medical support or oversight to complete). If an individual wishes to undergo a screening test using a test other than that provided by DAF, a "viral test" (which includes both antigen and molecular tests) can be used.

Screening testing will be conducted at least weekly but commanders may require more frequent testing based on local community transmission, **an installation outbreak, HPCON levels** (e.g., HPCON Charlie and Delta), and/or the specific type of test kit used, in accordance with Attachment 7 of reference (a). Commanders and supervisors must consult with their servicing MTFs in establishing the testing frequency in order to ensure their process complies with test kit requirements **as well as to ensure the process complies with the requirement for a negative test result no more than 72 hours prior to accessing DoD facilities. Commanders must be aware of the rationale for following the test kit package instructions to ensure test validity.** Units with no servicing MTF should defer to associated Public Health Emergency Officer (PHEO) or MAJCOM/FLDCOM PHEO for consultation.

DoD civilian employees teleworking or working remotely on a full-time basis are **not** subject to weekly testing, but must provide a negative COVID-19 screening test result from a test performed within the preceding 72 hours prior to entry into a DoD facility.

DAF civilian employees are responsible for providing acceptable documentation or evidence of negative COVID-19 screening test results, upon receipt, to the appropriate supervisor, or authorized human resources official, in accordance with the locally established testing process. This documentation or evidence will likely consist of the paper test result (or photo thereof), or an electronic result displayed on a cell phone application. However, DAF civilian employees cannot be required to use their own personal equipment (e.g., their cell phones) for the purpose of documenting test results (although they may do so voluntarily). Off-site self-tests may not be used if there is no means to document results using government equipment **or member does not volunteer to use their own personal equipment.**

5.1. Recordkeeping

Commanders are responsible for tracking, maintaining (and reporting when required) compliance with screening testing requirements for DAF civilian employees in their organizations. Such compliance tracking need only consist of documenting that each individual who was required to test did so, with the frequency required **and date completed.**

For the purposes of complying with this policy, there is no requirement to maintain a record of screening test **results** at the individual level. However, if test results are maintained, Commanders are responsible

for ensuring that supervisors maintain any COVID-19 test results provided by employees in accordance with applicable law and policy, including appropriate privacy protection measures in accordance with Attachment 9 of reference (a) including keeping such records in a confidential file separate from other employee records. Any document which contains a test result along with personally identifiable information is considered a medical record and must be treated in accordance with law and policy applicable to medical records.

DAF civilian employees who are required to undergo COVID-19 screening testing will do so on official duty time, which is expected to take no more than one hour, per test, including travel time. Commanders and supervisors should only authorize a DAF civilian employee to spend time obtaining a test during the employee's basic tour of duty hours and only for the amount of time necessary to travel to/from and obtain the test. If, due to unforeseen circumstances, the employee is unable to obtain the test during basic tour of duty hours, the normal overtime hours of work rules apply. (*Timecard Coding: DAF civilian employees must apply JON "COVTEST" to all labor hours, both regular and premium, used to obtain a required COVID-19 screening test or a subsequent confirmatory test*).

DAF contractor personnel with CRA will maintain a copy of their most recent COVID-19 screening test result and show such results to authorized DAF personnel, upon request.

5.2. Actions After Test Results

DAF civilian employees, and contractor personnel with CRA, who have positive COVID-19 screening test results will be required to remain away from the workplace in accordance with references (l) and (m). DAF civilian employees and contractor personnel with positive COVID-19 screening test results will be offered, but are not required to take, confirmatory laboratory-based molecular (i.e., polymerase chain reaction, or PCR) testing paid for by the DAF, and administered through local MTFs as resources allow. Those who are already eligible to receive care at MTFs should engage the normal appointment system to determine how best to obtain a confirmatory test. Those not already eligible to receive care at an MTF should contact an MTF to determine their capacity to provide the test. MTFs should be prepared for an increase in confirmatory testing, including ensuring adequate collection supplies and viable testing pathways to process the expected increase. If confirmatory testing is not available through an MTF, DAF civilian employees may be reimbursed for the cost of obtaining the test through a private provider. If confirmatory testing IS available at an MTF, but a DAF civilian employee declines to be tested there, they will not be eligible for reimbursement of any testing obtained through a private provider.

If the confirmatory test is negative, the individual is not deemed to be COVID-19 positive and will be allowed into the workplace.

If the confirmatory test is positive, Installation Public Health/MTF will be notified (for contact tracing) and the individual will be required to remain out of the workplace in accordance with references (l) and (m), and the most current CDC recommendations for disposition of confirmed or probable COVID-19 cases (in consultation with servicing Medical office).

- If the DAF civilian employee is a telework participant, and is asymptomatic/physically able to telework (i.e., not incapacitated from illness), the employee should do so, unless they request and are approved for personal leave.
- If the DAF civilian employee is not a telework participant, and is asymptomatic (i.e., not incapacitated from illness), the employee should be placed on weather and safety leave.
- If the DAF civilian employee is symptomatic, or incapacitated and unable to work due to illness, the employee should use personal leave (e.g., sick leave, annual leave, and leave without pay).

Laboratory-based confirmatory COVID-19 testing for initial positive screening test results is expected to take no more than 2 hours of official duty time.

Commanders and supervisors will monitor duty time usage and keep duty time used for testing within these parameters to the extent possible.

DAF civilian employees cannot be mandated by DAF authorities to quarantine or isolate, but may be barred from the workplace until authorized to return. **Barred civilian employees returning to the worksite without proper authorization will be subject to disciplinary action IAW AFI 36-704.**

Contact tracing and mitigation measures will be conducted in accordance with references (l) to (m).

5.3. Testing Refusals

If a DAF civilian employee who is not fully vaccinated refuses COVID-19 screening testing that has been mandated due to their vaccination status (including those with an approved *vaccination* exemption), supervisors may take appropriate corrective personnel action, including adverse employment action, up to and including removal from Federal service (after consultation with servicing civilian personnel and legal offices). Commanders and supervisors may bar such employees from their worksites on the installation or facility to protect the safety of others, including while adverse action is pending. While barred from their worksites on the installation or facility, such employees may be required to telework, as appropriate. If commanders do not bar such employees from their worksites (due to critical mission needs), they must ensure appropriate mitigation measures are in place to ensure the safety of all employees.

An exemption from COVID-19 vaccination due to religious or medical accommodation is not an exemption from the COVID-19 screening testing required by this policy. If a DAF civilian employee requests an exemption (e.g., a reasonable accommodation based on a disability or religious beliefs, practices, or observances) from participation in COVID-19 *screening testing* on a religious or medical basis, approval **authorities (and consistent with DoD guidance will be herein referred to as decision authorities)** should determine if an appropriate flexibility or accommodation is legally required and can be provided. (See section titled “**EXEMPTIONS AND ACCOMMODATIONS BASED ON MEDICAL CONDITION OR RELIGION**” below.) **While such testing exemption requests are separate and distinct from vaccination exemption requests, if an employee requests multiple exemptions (exemption from vaccination as well as from one or more mitigation measures), those separate requests should be processed and considered together, as they inform and have impact on each other.**

5.4. Testing Kits

Commanders will procure (through Defense Logistics Agency (DLA)) and provide these COVID-19 screening self-tests to DAF civilian employees (as well as contractors and official visitors if available) and establish local processes for where and how the tests will be distributed and conducted for not-fully-vaccinated individuals, and how results are to be reported. Commanders (or their designees) should work with their servicing MTF leadership, installation Public Health Emergency Officer and the MTF Logistics Flight to resource, order and supply organizations with approved testing kits. Organizations are responsible for funding required COVID-19 screening tests. **In exceptional circumstances, and in accordance with AFMAN 41-209, Medical Logistics Support, and AFI 64-117, Government Purchase Card Program, commanders may authorize the purchase of self-test kits from sources other than DLA. , such as for the purchase of alternative test kits as an accommodation in lieu of the nasal swab test.**

In accordance with Attachment 8 of reference (a), COVID-19 self-tests **(whether purchased through DLA**

or non-DLA sources) must have Instructions for Use and FDA Approval, 510(K) premarket clearance or have an FDA EUA, and will be made available through the Defense Logistics Agency. Additional information regarding the ordering of test kits can be found in Attachment 3, “**COVID-19 Home Test Kits Ordering Procedures**”.

These self-collection kits/self-tests are to be used within the FDA approved indication and the instructions should be carefully followed to increase the accuracy of the results. [Note: The instructions of a particular test kit may require, for example, that 2 tests be taken 24-36 hours between each test, and such instructions would therefore require more than the minimum 1-time-per-week testing.]

If self-collection kits or self-tests as referenced above are not available to DAF civilian employees through the DAF, employees will be reimbursed for COVID-19 screening tests that require payment for the purposes of meeting the screening testing requirement (e.g., if the screening test is not available through the DAF and must be administered by a facility who charges for the test). Individuals should not purchase or pay for tests without prior supervisory or commander approval.

Cost reporting for purchase of testing materials or reimbursement for DAF civilian employee tests should be in accordance with reference (o).

DAF civilian employees seeking reimbursement should work with the applicable organization’s resource advisor to submit OF 1164 Miscellaneous Pay Package to their local comptroller for processing. SAF/FM will provide additional guidance to comptrollers regarding reimbursements under separate cover.

6. ENFORCEMENT OF DAF CIVILIAN EMPLOYEE COVID-19 VACCINATION REQUIREMENT

DAF civilian employees who do not become fully vaccinated, fail to provide proof of vaccination, or fail to comply with vaccination requirement, are subject to corrective measures, up to and including removal from Federal service, unless the employee has received an approved exemption or the employee’s timely request for an exemption is pending decision. If an employee submits a request after enforcement action is initiated, such action may be held in abeyance where appropriate.

Commanders and supervisors should begin enforcement action as soon as circumstances warrant for DAF civilian employees who are not fully vaccinated and who do not have an exemption request approved or pending. Supervisors should consult with their servicing civilian personnel (Employee Relations) and legal offices to discuss options available to address individual situations regarding enforcement of these requirements, unless reasonable cause warrants a delay. Any decision to delay action should only be made after consultation with the servicing civilian personnel and legal offices.

Commanders and supervisors should generally follow the recommended guidelines in reference (g), and in accordance with DAF policy, including AFI 36-704, “Discipline and Adverse Actions of Civilian Employees”, 3 July 2018, or AFI 34-301, Non-appropriated Funds Personnel Management and Administration, 1 July 2019, and any applicable collective bargaining agreements.

Progressive enforcement actions should generally include, but are not limited to: a minimum 5-day period of counseling and education; a short suspension without pay, of 14 days or less, with an appropriate notice period (Note - SES members may only be suspended for more than 14 days); properly noticed removal from Federal service for failing to follow a directive/order/instruction. Any progressive enforcement actions taken must be taken in accordance with an individualized assessment of mitigating and aggravating factors, commonly referred to as the *Douglas* factors. Commanders and supervisors should consider the totality of circumstances of each case, along with the recommended guidelines, and

consult with servicing civilian personnel and legal offices before determining proposed discipline penalties. Commanders are encouraged to identify appropriate resources (e.g., occupational health office, medical office, chaplain office, etc.) with whom DAF civilian employees may be offered to consult for education and/or counseling.

During any disciplinary or adverse action notice period, DAF civilian employees should generally not be placed on administrative leave, but should be required to continue to work (either via telework or at the regular worksite) and follow all mitigation measures applicable to not-fully-vaccinated employees.

To ensure consistent application of appropriate considerations and guidelines, Commanders and supervisors should work closely with their servicing civilian personnel (Employee Management Relations Specialist) and legal offices on such actions, and will decide each case with due regard to the facts and circumstances of that case. Additional information in the form of FAQs will be provided to civilian personnel sections **under separate cover**.

7. EXEMPTIONS AND ACCOMMODATIONS BASED ON MEDICAL CONDITION OR RELIGION

A DAF civilian employee may request an exemption from the requirement(s) herein on the basis of a disability, medical condition/circumstance, or a sincerely held religious belief, practice or observance. Exemptions will be granted in limited circumstances and only where legally required. In keeping with DoD's requirement that exemption **decision authority** be placed at an appropriate level to consider the impact of the volume of requests and to promote similar cases being handled in a consistent manner, the **decision authority** to exempt a DAF civilian employee from the requirements herein is designated as follows:

- For DAF civilian employees at Installation Level – Wing/Delta Commanders (for Air Force Materiel Command, Wing Commander, Vice Wing Commander, or equivalent);
- For DAF civilian employees at Headquarters/Staff Organizations (including Field Operating Activities (FOA) and Direct Reporting Units (DRU)) – Organization heads will designate, in writing, a single Management Official as **decision authority** at a level no lower than O-6/GS-15;
- For DAF civilian employees at Combatant Commands (for which DAF is the Combatant Command Support Agent) – The Management Official with **decision authority** is the Air Force Element Commander, and may be further delegated to a single DAF Management Official within the Combatant Command at a level no lower than the O-6/GS-15.

MAJCOM Commanders and equivalent civilian leaders are ultimately responsible for the exemption processes put in place within their commands and organizations. At a minimum, this oversight responsibility includes ensuring the exemption processes put in place comply with all applicable Federal, DoD and DAF requirements.

Commanders must ensure that employees are informed how to make a request for an exemption, including the deadline to do so. In order to ensure that **decision authorities** can fully understand the effect of accommodation requests on DAF operations and to help ensure timely review of such requests, DAF civilian employees should as a general matter promptly notify supervisors that they are seeking a legally required exception to the vaccination mandate, or other accommodation, and should have **submitted their request no later than November 8, 2021**, absent extenuating circumstances, to be considered timely. An employee's failure to submit a timely request for exemption is not a basis to deny a request, but may be relevant in evaluating the request.

If a DAF civilian employee has requested an exemption (e.g., a reasonable accommodation based on a medical condition/disability or religious beliefs, practices, or observances) from any portion of this guidance, **decision authorities** should determine if an appropriate flexibility or accommodation is legally

required in accordance with the appropriate legal standard, and can be provided. While exemption requests are pending decision, employees should be granted a temporary delay in compliance with the vaccination mandate **or other requirement for which exemption is being requested**. Discipline for failure to meet the COVID-19 vaccination requirement will not be initiated against a DAF civilian employee while a timely request for a medical or religious exemption from the COVID-19 vaccination requirement is pending determination. If an employee submits a request after discipline is initiated, disciplinary measures may be held in abeyance, where appropriate.

Commanders must ensure that exemption requests are processed as expeditiously as possible and processing must begin on or before January 12, 2022; however, decisions on such requests should not be made prior to that date.

In order to ensure that **decision authorities** are proactive in seeking out and considering possible accommodations and flexibilities, and are consulting with appropriate resources for assistance, installations will establish a **Decision Authority Support Office (DASO) (previously referred to as the Exemption Review Team (ERT))**. [Note – DASO/ERTs may also be established as appropriate at the Center, Numbered Air Force, or Headquarters-level, as applicable.] Similar to the Religious Resolution Team used in the Service member religious exemption process, the **DASO/ERT** will include (at minimum) subject matter experts (SMEs) from servicing **offices in the areas of** legal, occupational health, equal employment opportunity, Disability Program Manager (DPM), **religious matters** (for religious-based requests), and civilian human resources, and may include other SMEs as deemed appropriate (e.g. public health). Installation commanders **must** ensure adequate resources, including appropriate administrative support, are provided to the **DASO/ERT** to process an expected high volume of exemption requests. While exemption requests are pending decision, employees should be granted a temporary delay in compliance and no enforcement action should be taken during this time period.

The DASO/ERT SMEs will serve as advisors to the decision authority, assist in determining the facts and circumstances of each request, and will provide individual consultation and advice to the decision authority as necessary. The DASO/ERT will also assist the decision authority, as needed, in obtaining reasonably necessary additional information (e.g., medical documentation, an interview of the requesting employee, supervisory statement, workplace environment information, etc.) and will provide subject matter expertise to the decision authority. Decision authority officials will consult with their servicing DASO/ERT SMEs, as necessary and appropriate, for both medical and religious-based requests. DASO/ERT SMEs are not to be used to develop a “group” or consensus recommendation or decision.

DAF Occupational Health personnel used on the **DASO/ERT** may include SGP (Chief of Aerospace Medicine), Occupational Medicine Physician, Flight Surgeon, or a credentialed DoD healthcare provider with occupational medicine background/training.

An exemption from COVID-19 vaccination is not an exemption from COVID-19 screening testing, or from other force health protection and workplace health and safety mitigation measures. DAF civilian employees who are not fully-vaccinated, but who have a pending request for exemption from vaccination are required to comply with any mitigation measures that are applicable to all not-fully-vaccinated employees in the worksite (for example screening testing, masking, and physical distancing). **Requests for accommodation related to those other mitigation measures are separate and distinct from vaccination exemption requests. If an employee requests multiple exemptions (exemption from vaccination as well as from one or more mitigation measures), those separate requests should be processed and considered together, as they inform and have impact on each other.**

DAFI 36-2710 is the applicable guidance document for processing requests for reasonable accommodations based on disabilities. It is DAF policy that **all** requests for exemption from requirements herein (whether based on disability, medical condition or circumstance, or religious beliefs) will follow a similar process to that outlined in DAFI 36-2710, and as outlined herein, incorporating advice and consultation from a **DASO/ERT**.

Determining whether an exemption is legally required must be an individualized assessment of the particular facts and circumstances of the requesting employee's situation. It will include consideration of factors such as: the basis for the claim; the nature of the DAF civilian employee's job responsibilities; the impact, if any, of the volume of approved requests; and the potential effects on the DAF's mission and operations, including protecting other employees and the public from COVID-19. **Decision authorities** should consider viable alternatives to exemptions that allow for accommodation of the religious belief or medical conditions without putting others at risk. Examples of such possible alternatives include, but are not limited to: telework; altering work schedules or cohorting; and **lateral** reassignment to a different position or to different duties that may allow for telework (**subject to approval of gaining organization**). Additional information regarding assessing exemption requests **and the function of the DASO/ERT SMEs will be issued under separate cover**.

Because exemption request determinations must be based on individualized assessments, which include the particular facts and circumstances (both personal and job-related) of the requesting employee's situation, an approved exemption does not "transfer" with an employee from one job to another, from one location to another, or from one agency to another. An employee should submit a new exemption request based on the new situational circumstances in such cases.

A DAF civilian employee who receives an exemption from the vaccination requirement (**or other mitigation measure requirements**) may, because of the exemption, be unable to perform the duties and responsibilities of the position without a change in working conditions. Such matters will be referred to the reasonable accommodation process.

7.1. Medical Condition-Based Requests

Requests by DAF civilian employees for a reasonable accommodation, based on a disability or medical condition or circumstance that contraindicate obtaining a COVID-19 vaccination or complying with other requirements of this policy, will be submitted and processed in accordance with DAFI 36-2710, *Equal Opportunity Program*, and this guidance.

To make a request for exemption from vaccination, **a** civilian employee must **submit their request** to their supervisor (or authorized human resources official). **The request consists of** an official statement which describes the medical reason or basis the employee objects to vaccination against COVID-19 (**or other requirement from which the employee is seeking exemption**). Such requests generally **must** be in writing, and employees may use the DD Form 3176, "Request for a Medical Exemption or Delay to the COVID-19 Vaccination Requirement (Attachment 5 of reference (a)) to submit their request. **[Note: if a DAF civilian employee makes an oral request, they may be provided a sample written request format and/or be interviewed to develop the basis for the request.]** While the use of the DD Form 3176 is optional for DAF civilian employees, when they make such a request, they must provide the following information:

- A description of the medical condition or circumstance that is the basis for the request for a medical exemption from the requirement;
- An explanation of why the medical condition or circumstance prevents the employee from being safely vaccinated against COVID-19, or from meeting the other requirement(s);

- If it is a temporary medical condition or circumstance, a statement concerning when it will no longer be a medical necessity to delay vaccination against COVID-19, or to refrain from complying with the other requirement; and
- Any additional information, to include supporting medical documentation that addresses the employee's particular medical condition or circumstance, which may be helpful in resolving the employee's request for a medical exemption.

The general request process for civilian employees (for both medical and religious-based exemption requests) is summarized as follows [Note – The below is only a general summary. The provisions of DAFI 36-2710 generally still apply to medical accommodation requests]:

- The DAF civilian employee should initiate the process by submitting their request to their supervisor or authorized human resources official.
- The supervisor/authorized human resources official will engage in an interactive process with the employee to ensure all necessary and relevant information is included with the request (to include a written statement regarding the nature of the DAF civilian employee's job responsibilities and work environment and the potential impact on these if the requested exemption is approved) and then submit the request package to the servicing DASO/ERT (for medical requests, to the DPM DASO/ERT member). The supervisor/authorized human resources official will then update the employee's DD Form 3175, Section B, (via milConnect if used to submit the original form) to reflect that a request for exemption has been received and is pending. The employee will also update their DD Form 3175, Section A, to indicate they have submitted an exemption request.
- The appropriate DASO/ERT member will enter the request into the designated tracking tool. The DASO/ERT HR representative will work with the supervisor as necessary to ensure a complete request package is developed.
- To ensure the decision authority has all the relevant and necessary information by which to make their decision, as well as to ensure consistent application of appropriate considerations and guidelines, the appropriate DASO/ERT SMEs will review each request and provide advice and consultation to the decision authority as appropriate and necessary. In order to ensure timely action, packages will be submitted from the supervisor directly to the DASO/ERT without intermediate review or concurrence. If the DASO/ERT believes additional information is reasonably necessary for the decision authority to properly evaluate the request, the HR DASO/ERT representative should contact the supervisor and/or appropriate SMEs to obtain the information.
- It is expected that decision authorities will need the advice and consultation of DASO/ERT SMEs to ensure all relevant information is properly considered. It is therefore DAF policy that decision authorities will request that DASO/ERT SMEs provide any additional information the SMEs deem relevant to each case, including written documentation of factual information (for example CDC recommendations for medical exemption criteria), and as necessary, individual (not consensus) professional opinions related to the factual information, for inclusion in each exemption request package. DASO/ERT SMEs will not provide approval/disapproval recommendations to the decision authority, nor will they provide "consensus" opinions or recommendations. Each SME should provide advice based on their individual area of expertise. (For example, medical SMEs shall provide assessments and recommendations based on the occupational health area of expertise.) Recommendations MAY be made however, regarding such things as additional mitigation measures that should be implemented for a specific case, or alternate accommodations that may be considered.
- After review, the DASO/ERT will forward the request package to the decision authority.
- The decision authority will review the request and further consult with DASO/ERT SMEs as necessary and appropriate for each case. The decision authority must ensure the package

includes a complete written factual record before making their decision. [Note – per reference (t), if the decision is to deny the accommodation request, no further review or endorsement is required.] The decision authority prepares the written statement (with drafting assistance as necessary from the DASO/ERT), which includes the reasons for the decision based on the employee's individual circumstances.

- The decision will then be reviewed for legal sufficiency. (The DASO/ERT legal representative may perform this review when staffing and workload in servicing legal offices does not allow for a different person to perform this task.)
- The decision will be forwarded to the supervisor/authorized HR official to be communicated in writing to the employee. If the request is denied, the written decision must include the reason(s) for the decision, as well as a directive/order to begin taking the necessary steps to come into compliance and the date by which the employee must be fully vaccinated against COVID-19.
- The DAF civilian employee and their supervisor/authorized human resources official must then properly annotate/update the employee's DD Form 3175, both Sections A and B.

[NOTE – The above is only a general summary of the process and is not intended to supersede the requirements outlined in DAFI 36-2710.]

Development of a written factual record will include:

- Basis for the request and any supporting documentation submitted by the employee;
- Description of the nature of the DAF civilian employee's job responsibilities and work environment; and
- Any circumstances relevant to a management-level assessment of the reasonably foreseeable effects on the organization's operations and DAF mission, including protecting other DAF employees and members of the public with whom the employee interacts in the workplace from COVID-19, if the employee remains not-fully-vaccinated.

Generally, DAF civilian employees whose request is denied (or who are granted only a temporary exemption) should be directed to begin taking the necessary steps to come into compliance; specifically, they should be given a date by which they must be fully vaccinated against COVID-19, and they must be given a minimum period of 14 days to receive their first (or only) dose of a COVID-19 vaccine.

Even in cases where a DAF civilian employee does not meet the legal definition of "disability" to be entitled to an accommodation under the Rehabilitation Act, in some limited circumstances a decision authority may grant an extension to a vaccination deadline based upon other medical considerations. For example, the CDC recommends delaying COVID-19 vaccination for at least 90 days after receiving monoclonal antibodies or convalescent plasma for COVID-19 treatment. Decision authorities in receipt of documented medical reasons that may not qualify as a disability, but that necessitate a delay in vaccination, should grant extensions; but they should also specify, consistent with the nature of the medical necessity, by what date the employee must become fully vaccinated.

During the period in which vaccination is delayed, a DAF civilian employee must follow applicable masking, physical distancing, and testing protocols (and any other mitigation measures deemed necessary) for not-fully-vaccinated individuals, as well as applicable travel guidance. There may be circumstances in which a supervisor or commander determines that the nature of a DAF civilian employee's job responsibilities requires heightened safety protocols during the intervening time.

Requests for medical exemption will be treated as medical records to be maintained separately from the employee's personnel file and in accordance with Attachment 9 of reference (a).

7.2. Religion-Based Requests

DAF civilian employees with a sincerely held religious objection to vaccination or other requirements of this policy may request an exemption as an accommodation. [Note: DAFI 52-201, *Religious Freedom in the Department of the Air Force*, does not apply to DAF civilian employees, with the exception of paragraph 10.] Requests will be processed in accordance with this guidance; generally, such requests for religious-based exemptions will follow the same process as outlined in the section above, “**MEDICAL CONDITION-BASED REQUESTS**”, excepted as noted below.

To make a request for exemption from vaccination, a DAF civilian employee must **submit their request to their** supervisor (or authorized human resources official). **The request consists of** an official statement which describes the religious reason the employee objects to vaccination against COVID-19 **(or other requirement from which the employee is seeking exemption)**. Such requests generally **must** be in writing, and employees may use the DD Form 3177, “Request for a Religious Exemption to the COVID-19 Vaccination Requirement”, (Attachment 6 of reference (a)) to submit their request. [Note: if a DAF civilian employee makes an oral request, they may be provided a sample written request format and/or be interviewed to develop the basis for the request.] While the use of the DD Form 3177 is optional for DAF civilian employees, when they make such a request, they must provide the following information:

- A description of the religious belief, practice, or observance that is the basis for the request for a religious exemption from the requirement;
- A description of when and how the DAF civilian employee came to hold the religious belief or observe the religious practice;
- A description of how the employee has demonstrated the religious belief or observed the religious practice in the past;
- An explanation of how the requirement conflicts with the religious belief, practice, or observance;
- A statement concerning whether the DAF civilian employee has previously raised an objection to a vaccination, medical treatment, or medicine based on a religious belief or practice. If so, a description of the circumstances, timing, and resolution of the matter; and
- Any additional information that may be helpful in resolving the employee’s request for a religious exemption. This may include a memo from a religious leader familiar with the employee’s beliefs.

The DAF civilian employee is responsible for notifying their supervisor of the conflict between the requirement/policy and the religious observance, practice, or belief, and for submitting the required exemption request package.

Supervisors/authorized human resources **officials are responsible for ensuring** an interactive discussion is held with the employee to inform a thorough evaluation of the employee’s request; a determination may be made without this discussion. The discussion may include a mutual sharing of information necessary to understand and process the request as well as all possible alternatives/least restrictive methods that could eliminate the conflict on a case-by-case basis. The **decision authority** is not obligated to provide the employee’s *preferred* method of accommodation.

8. CONTRACTOR PERSONNEL CONSIDERATIONS

For DAF contractor personnel, the DAF civilian vaccination deadline of November 22, 2021 does not apply. Vaccination requirements for DAF contractor personnel will be in accordance with reference (i), as implemented by reference (j), as directed under Executive Order 14042 (reference (k)).

DAF contractor personnel will complete DD Form 3150, “Contractor and Visitor Certification of Vaccination” (Attachment 4 to reference (a)), maintain a current completed DD Form 3150, and show it to authorized DAF personnel, upon request. Failure to complete the DD Form 3150 may result in denial of access of DAF contractor personnel to the DoD facility to which access is sought. Contractor completion

of the DD Form 3150 will be in hard copy, not via milConnect. (For hard copy use, the form may be accessed at <https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd3150.pdf>.)

DAF contractor personnel who are not fully vaccinated against COVID-19 as defined in this guidance, regardless of the reason, (including for reasons such as they are not performing under a covered contract that requires COVID-19 vaccination, they have a legally required accommodation, or who decline to attest to their COVID-19 vaccination status), will be subject to COVID-19 screening testing at least weekly in accordance with Attachment 7 of reference (a) and this guidance. DAF contractor personnel who refuse required screening testing will be denied access to DoD facilities. For COVID-19 screening testing of such contractor personnel with CRA, commanders will offer, if available, COVID-19 testing similar to that offered to DAF civilian employees at the DAF's expense and at no cost to the contractor personnel or the contractor.

DAF contractor personnel with CRA will maintain a copy of their most recent COVID-19 screening test result (which must be within the last 72 hours) and show such results to authorized DAF personnel, upon request. This does not apply to DAF contractor personnel without CRA.

DAF contractors are responsible for ensuring their employees comply with applicable portions of this guidance; specifically including but not limited to, completion of the DD Form 3150 and any resultant testing requirements.

In accordance with applicable contracts, DAF contractor personnel may be offered, but are not required, to receive COVID-19 vaccines at their DoD worksites.

DAF contractor personnel who are subject to the requirements in this guidance may incur additional expenses not initially contemplated by the original contract. If this occurs, the original contract terms may need to be modified and the contractor may be entitled to additional compensation (i.e. a request for equitable adjustment or through the submission of a claim). When the original contract needs to be modified, DAF civilian employees must work with the Contracting Officer **before** taking action.

9. OFFICIAL VISITOR CONSIDERATIONS

Official visitors (including official DAF volunteers) will complete DD Form 3150 in hard copy, maintain a current completed form, and show it to authorized DAF personnel upon request. (For hard copy use, the form may be accessed at <https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd3150.pdf>.) Failure to complete the DD Form 3150 may result in denial of an official visitor's access to the DoD facility to which access is sought.

Official visitors who are not fully vaccinated against COVID-19, as defined in this guidance, or who decline to volunteer their vaccination status, must show an electronic or paper copy of negative results from an FDA approved COVID-19 test administered no earlier than 72 hours prior to their visit.

If an official visitor is unable to show a negative COVID-19 test result, the visitor may be provided on-site self-testing, if testing kits are available, or will be denied access to the DoD facilities to which access is sought.

Service members who are not on active duty at the time of their official visit are subject to the above requirements.

Official visitors will follow applicable policies and procedures of both DAF and the Department or Agency they are visiting, if different from DAF. Individuals other than official visitors seeking access to facilities located on DAF installations, but operated by other Federal departments and agencies, will follow the policies and procedures of that other department or agency.

10. TRAVEL AND MEETINGS

Restrictions On Official Travel – In accordance with reference (s), for DAF civilian employees who are not fully vaccinated or who decline to provide information about their vaccination status, official domestic travel (including official travel for PCS) will be limited to only necessary mission-critical trips, both domestic and international (e.g., deployments, COVID-19 response deployments or activities, high-level international negotiations that cannot occur remotely). Fully vaccinated DAF civilian employees are not restricted from official travel, both domestic and international. “Mission critical” will be determined by the Under Secretary of the Air Force. (SecAF has delegated this authority in writing to the Under Secretary of the Air Force, but it cannot be further delegated.) Commanders may request approval from the Under Secretary of the Air Force by submitting a request through the MAJCOM/FLDCOM chain of command to haf-es.workflow@us.af.mil. [Note: An approved request for exemption from vaccination does NOT negate the requirement to obtain separate approval for official travel under the above guidelines.]

Quarantine Due to Travel – The status of a DAF civilian employee who must quarantine due to travel is determined primarily by the reason for the travel. In both cases, if an employee is telework eligible and not incapacitated due to illness, the employee should telework as the first option.

- If a DAF civilian employee has to quarantine because of official travel, and they are not a telework participant, they should be placed on either weather and safety or administrative leave.
- If a DAF civilian employee has to quarantine because of personal travel, and they are not a telework participant, they should request appropriate leave while quarantining. If an employee refuses to request personal leave, commanders can bar the employee from the workplace for the safety of others. If an employee is barred from the workplace due to refusal to request personal leave after personal travel, they should be placed on administrative leave until the supervisor, in consultation with the servicing civilian personnel and legal offices, determines the appropriate status.

Travel Expense Reimbursement - DAF civilian employees will not be reimbursed for travel-related expenses while on administrative leave to accompany family members to vaccination events. Reasonable travel costs that are incurred as a result of a DAF civilian employee obtaining a required screening test from a site preapproved by the agency should be handled the same way as local travel or temporary duty (TDY) cost reimbursement is handled based on DAF policy.

Meetings and Conferences – In accordance with reference (s), for any planned in-person meetings, events, conferences (referred collectively herein as “meetings”) sponsored by DAF with more than 50 participants, the meeting organizer will obtain advance approval from the Under Secretary of the Air Force to hold the meeting. (SecAF has delegated this authority in writing to the Under Secretary of the Air Force, but it cannot be further delegated.) Commanders may request approval from the Under Secretary of the Air Force by submitting a request through the MAJCOM/FLDCOM chain of command to haf-es.workflow@us.af.mil. For any such approved in-person meetings, the meeting organizer will require all attendees to show a completed attestation form (either the DD Form 3150 or DD Form 3175, as applicable). **In-person attendees must comply with all applicable guidance.**

11. REPORTING REQUIREMENTS

DoD weekly reporting of aggregate information began September 22, 2021, and will continue as directed. All data submitted electronically via milConnect, either by individual employees or through batch-

uploading, will be reported by DoD through the electronic system; therefore it is critical that all DAF civilian employees' vaccination status information be uploaded via milConnect, either by the employee or an authorized human resources official.

Additionally, in an effort to ease reporting of personnel actions associated with the vaccination requirement, the remark code "ZCV", along with the statement "This remark is for reporting purposes" has been established to identify effected personnel actions. This code can be used with the following Nature of Actions:

301 – Retirement-Disability	302 – Retirement-Voluntary
304 – Retirement-ILIA	307 – Full Retirement Status-Voluntary
308 – Full Retirement Status-ILIS	312 – Resignation-ILIA
317 – Resignation	330 – Removal
385 – Termination	450 – Suspension NTE
452 – Suspension-Indefinite	713 – Change to Lower Grade, Level, or Band
721 – Reassignment	

Civilian Personnel Offices should incorporate the use of this remark for all actions in which it is known that the decision to effect the personnel action was influenced by the COVID-19 vaccination mandate.

12. WORKERS' COMPENSATION CLAIMS

There may be instances when a DAF civilian employee impacted by the vaccination mandate may be afforded coverage under the Federal Employees' Compensation Act (FECA) for adverse reactions to the vaccine itself, or for injuries sustained while obtaining the vaccination and/or required testing.

The COVID-19 vaccination is a specific event occurring during a single day or work shift, and any adverse reactions or injuries should be reported on Form CA-1, Notice of Traumatic Injury and Claim Continuation of Pay/Compensation (NAF employees should use the Department of Labor Form LS-201 – *Notice of Employee's Injury or Death*). Where two vaccinations are required several weeks apart, reactions to each are considered separate claims if the vaccine was received prior to September 9, 2021. If the vaccination was received prior to this date, coverage is afforded only if the vaccine was administered or sponsored by the employing agency.

If an employee is covered by Executive Order 14043 and the vaccination was received on or after September 9, 2021, coverage may be afforded for (1) adverse reactions to the COVID-19 vaccination, and (2) injuries sustained as the direct result of an employee receiving their mandated vaccination.

If an employing agency requires employees to receive their mandatory vaccination at specific times and/or at a specific location(s), coverage is only afforded if the employee follows the agency's vaccination policy. If any employing agency allows an employee to obtain their mandatory vaccination at any time or location, coverage is afforded regardless of where or when the employee receives their vaccination, with the only limitation being for that of reasonableness.

Supervisors or employees should contact the AFPC Injury Compensation section for guidance on filing the claim (by email at injury.compensation@us.af.mil ; by fax at 210-565-2952 or DSN 665-2952).

(Date)

MEMORANDUM FOR (Name)

FROM: (Unit CC/Supervisor Office Symbol)

SUBJECT: COVID-19 Vaccination Mandate

On September 9, 2021, the President of the United States directed mandatory COVID-19 vaccination for all Federal employees in order to ensure the health and safety of the Federal workforce and members of the public with whom they interact, subject to exemptions as provided by law. Subsequently, the Deputy Secretary of Defense issued “Mandatory Coronavirus Disease 2019 Vaccination of DoD Civilian Employees,” dated October 1, 2021, and the Department of the Air Force (DAF) implemented that directive by memorandum from the Secretary of the Air Force, “Mandatory Coronavirus Disease 2019 Vaccination of Department of the Air Force Civilian Employees”, dated October 8, 2021, and as revised by the Secretary of the Air Force, “Delegation of Authority for Deciding Exemptions for Mandatory Coronavirus Disease 2019 Vaccination of Department of the Air Force Civilian Employees”, dated 3 November, 2021.

To implement these directives, if you are not currently fully vaccinated (as defined herein), you are hereby directed to take the necessary steps to ensure you become fully vaccinated against COVID-19 **immediately, but** no later than **January 16, 2022***. You are also directed to provide administratively acceptable evidence of your vaccination status upon receipt of each dose, with fully vaccinated status demonstrated by **February 16, 2022***. Examples of administratively acceptable evidence are listed below.

If you have a medical condition that contraindicates a COVID vaccination, you may seek an exemption to the vaccination requirement through the disability reasonable accommodation process set out in DAFI 36-2710, *Equal Opportunity Program*. You will need to provide documentation from your medical provider of your disability and the reason you cannot be safely vaccinated to support the request for reasonable accommodation. Such request must be submitted no later than November 8, 2021, absent extenuating circumstances, to be considered timely. Additional guidance regarding the submission of such requests can be found in the “DAF Mandatory COVID-19 Vaccination Guide”, dated 22 October, and as revised on 3 November.

If you have a sincerely held religious objection to vaccination, you may seek an exemption as a reasonable accommodation by notifying your supervisor of your religious objection. Additional guidance regarding submission and processing of such exemption requests can be found in the Guide mentioned above. Religious-based requests must also be submitted no later than November 8, 2021.

Employees are considered fully vaccinated against COVID-19 two weeks after completing the second dose of a two-dose COVID-19 vaccine (e.g., Moderna or Pfizer-BioNTech/Comirnaty vaccine), or two weeks after receiving a single dose of a one-dose COVID-19 vaccine (Johnson & Johnson/Janssen vaccine).

You must **have met** the following deadlines in order to be fully vaccinated by **the previous deadline of** November 22, 2021:

- October 11: first dose deadline (if receiving Moderna vaccine)

- October 18: first dose deadline (if receiving Comirnaty/Pfizer-BioNTech vaccine)
- November 8: second dose deadline (if receiving Moderna or Comirnaty/Pfizer-BioNTech vaccines)
- November 8: first (only) dose deadline (if receiving Johnson & Johnson/Janssen vaccine).

Having failed to meet that deadline, you are now required to be fully vaccinated no later than February 16, 2022*. You may get vaccinated against COVID-19 free of charge through the DAF vaccination program or at any DoD vaccination site, including military treatment facilities. Alternatively, you may opt to obtain COVID-19 vaccination through a private provider. If vaccination is not available to you through a DoD source, you may be reimbursed for the cost of getting vaccinated, if the cost is not covered by health insurance. However, if vaccination is available to you through a DoD source, and you opt to get vaccinated through a private provider, then you will not be eligible for reimbursement.

This requirement can be met by using: any vaccine that is either fully licensed or authorized for emergency use by the FDA (e.g., COMIRNATY/Pfizer-BioNTech, Moderna, Johnson & Johnson/Janssen); a recommended dose series of COVID-19 vaccines authorized for emergency use by the World Health Organization (WHO) (e.g., AstraZeneca/Oxford); or vaccine approved for use in a clinical trial for which vaccine efficacy has been independently confirmed (e.g., Novavax). You are not considered fully vaccinated or exempt based on previous COVID-19 infection or positive serology.

You will be granted duty time (including time spent traveling to/from the vaccination location and any waiting time) for the purpose of receiving any authorized COVID-19 vaccination from DoD, Federal, State and local government organizations, or private health care organizations and pharmacies. Regardless of whether you get vaccinated through the DoD or through a private provider, you will receive the duty time necessary to obtain the vaccination, generally up to 4 hours per vaccination event. Additionally, you will be granted up to 2 workdays of administrative leave (for each dose) if you have an adverse reaction to a COVID-19 vaccination dose that prevents you from working.

Documentation to prove vaccination status may include:

- Copy of record of immunization from a health care provider or pharmacy;
- Copy of COVID-19 Vaccination Record Card (CDC Form MLS-319813_r, published on September 3, 2020);
- Copy of medical records documenting the vaccination;
- Copy of immunization records from a public health or state immunization information system;
- OR
- Copy of any other administratively acceptable official documentation containing the required data.

Administratively acceptable documentation must be identifiable to the employee (i.e., contain their name) and must contain the following required data points, which the supervisor must verify:

- Type of vaccine administered;
- Number of doses received;
- Date(s) of administration; AND
- Name of health care professional(s) or clinic site(s) administering the vaccine(s).

Civilian employees who refuse to be vaccinated or fail to provide proof of vaccination, absent an approved exemption based on a medical or religious accommodation, may face disciplinary actions, up to and including removal from Federal service in accordance with AFI 36-704, *Disciplinary and Adverse Actions of Civilian Employees*. Additionally, DAF civilian employees who are not fully vaccinated must comply with all DAF requirements for individuals who are not fully vaccinated, including requirements and restrictions related to masking, physical distancing, travel and screening testing requirements. Authority to exempt DAF civilian employees from the COVID-19 vaccination requirement is in accordance with Secretary of the Air Force Memorandum, "Delegation of Authority for Deciding Exemptions for Mandatory Coronavirus Disease 2019 Vaccination of Department of the Air Force Civilian Employees," November 3, 2021.

Should you have questions or concerns regarding getting vaccinated against COVID-19, I am providing you information (attached to this memorandum) to educate you on the vaccinations. Additionally, you may visit the Center for Disease Control and Prevention website at <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/index.html> for education on the vaccinations, their safety and potential side effects. I would also encourage you to consult with your personal medical provider for more information.

NAME
Title

I acknowledge receipt of this memorandum (signature below does not imply agreement, only acknowledgement of receipt):

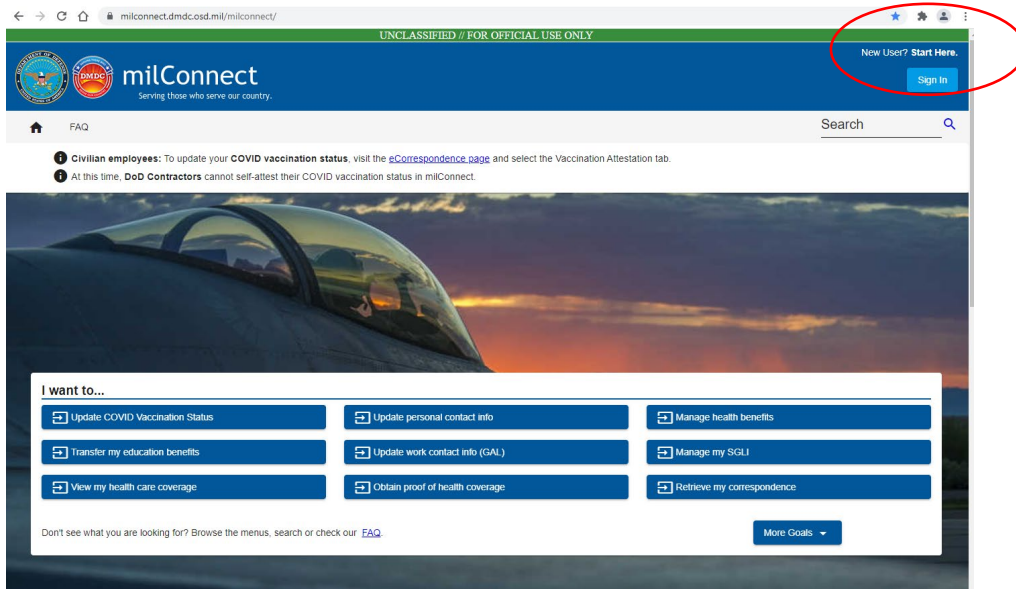
Employee Signature / Date: _____

* These dates are examples only and the supervisor/commander should determine what dates are appropriate based on individual case circumstances.

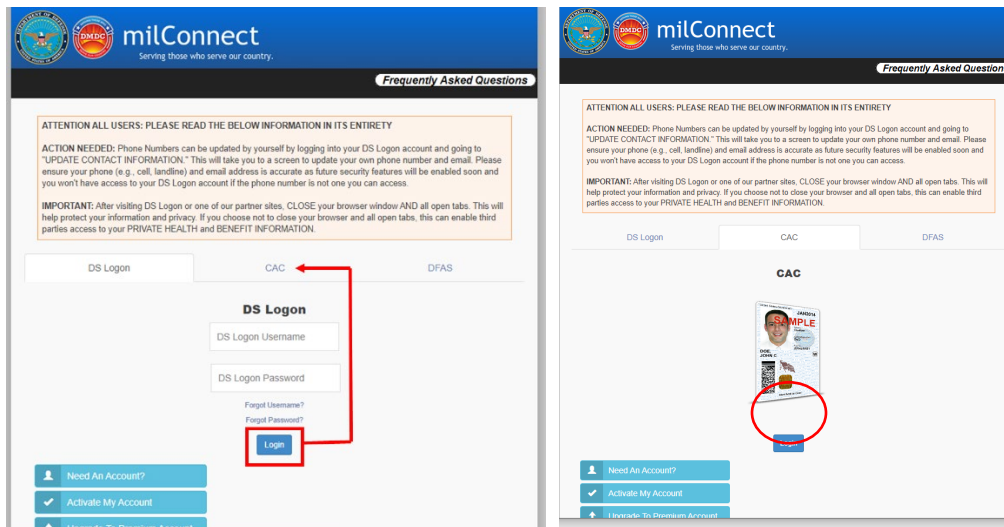
Attachment 2 – Electronic DD Form 3175 & 3150 User Guides

Go to <https://milconnect.dmdc.osd.mil/milconnect/> (Note: Best used in Chrome or Edge) Select Sign In (upper right corner)

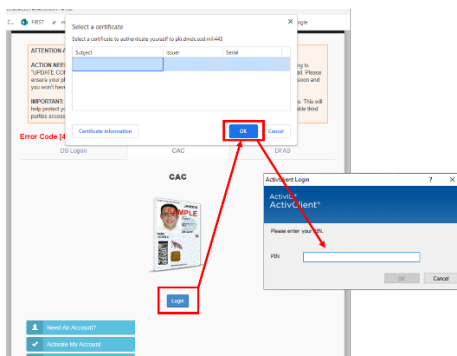
Electronic DD Form 3175 User Guide



Select CAC option and login

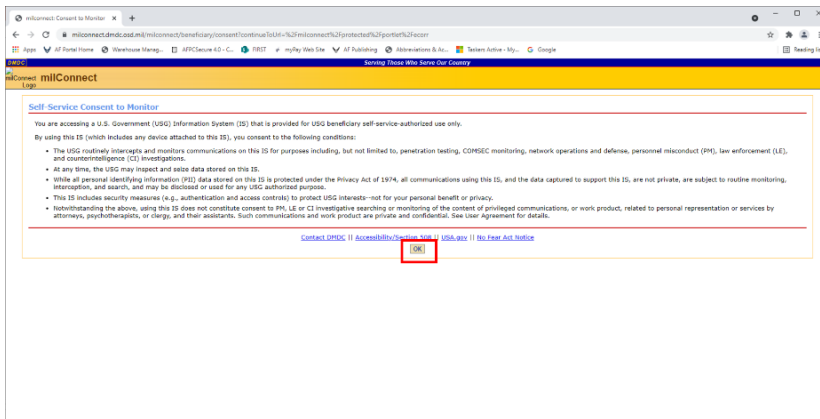


Select certificate and OK (enter PIN as prompted)

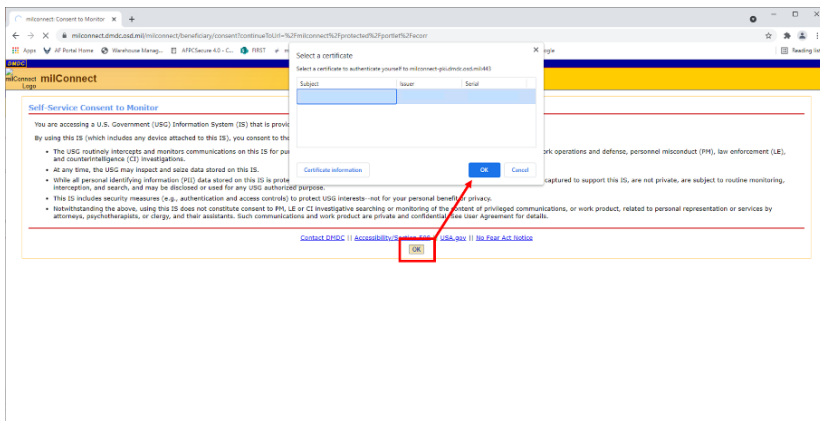


Attachment 2 – Electronic DD Form 3175 & 3150 User Guides

Click OK at Consent Banner

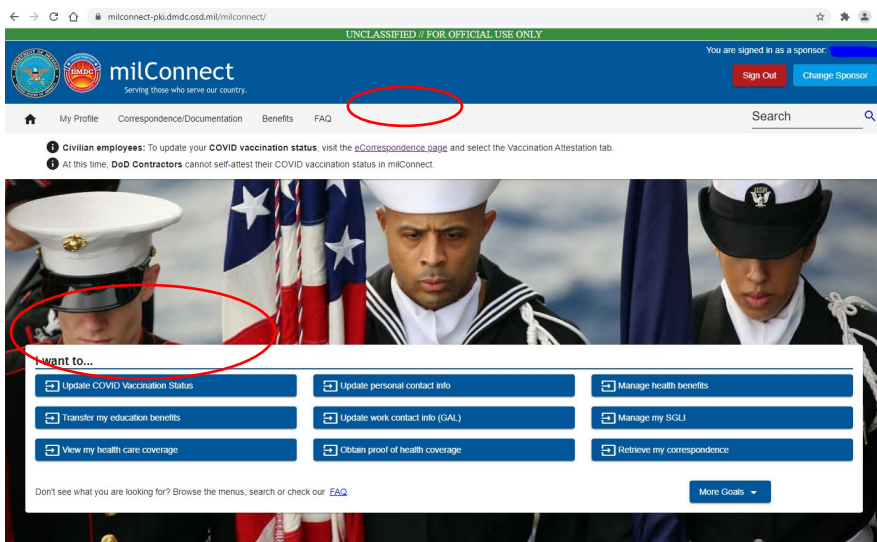


Select Certificate and Click OK



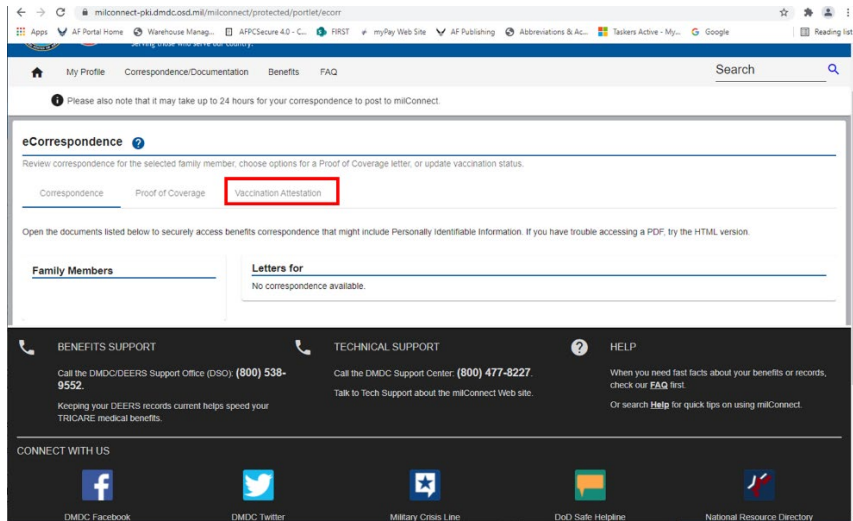
Select either the link to eCorrespondence page next to Civilian employees: or I want to Update COVID Vaccination Status

(Note: Must be signed in as a sponsor, those with dependent status must change sponsor to themselves to access the DD3175 as a civilian employee)

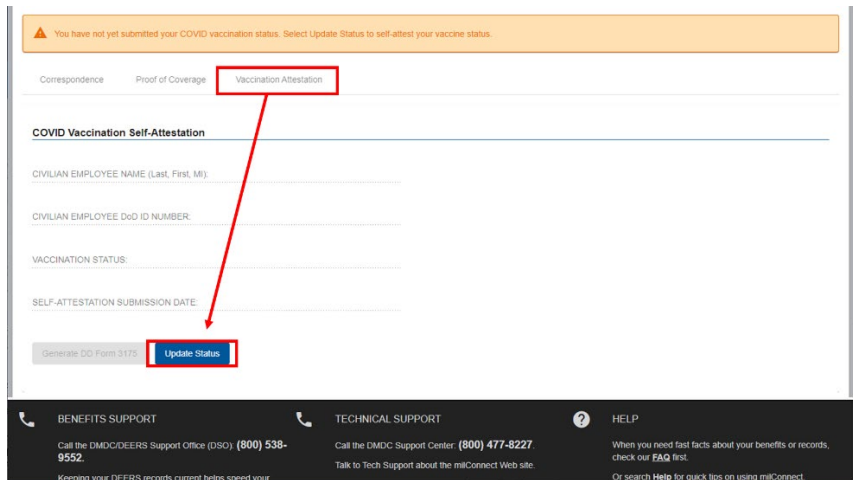


Attachment 2 – Electronic DD Form 3175 & 3150 User Guides

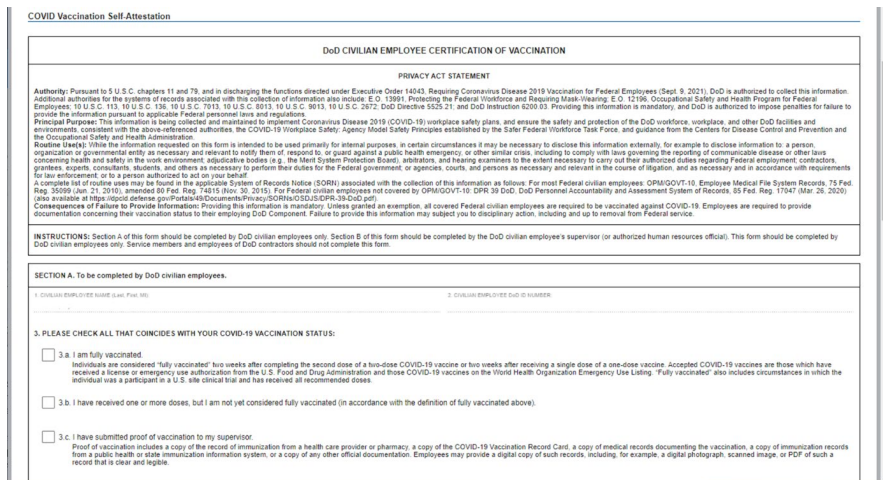
Select Vaccination Attestation



Select Update Status (Note: If DD3150 was previously filled out update status will now take you to the DD3175)



The DD3175 will open with identification information already populated



Attachment 2 – Electronic DD Form 3175 & 3150 User Guides

If 3a is selected - 3b, 3e, 3f and section 4 will become grayed out
- 3c will be available to select

SECTION A. To be completed by DoD civilian employees.

1. CIVILIAN EMPLOYEE NAME (Last, First, MI): _____ 2. CIVILIAN EMPLOYEE DDC NUMBER: _____

3. PLEASE CHECK ALL THAT COINCIDES WITH YOUR COVID-19 VACCINATION STATUS:

3.a. I am fully vaccinated.
Individuals are considered "fully vaccinated" two weeks after completing the second dose of a two-dose COVID-19 vaccine or two weeks after receiving a single dose of a one-dose vaccine. Accepted COVID-19 vaccines are those which have received a license or emergency use authorization from the U.S. Food and Drug Administration and those COVID-19 vaccines on the World Health Organization Emergency Use Listing. "Fully vaccinated" also includes circumstances in which the individual was a participant in a U.S. site clinical trial and has received all recommended doses.

3.b. I have received one or more doses, but I am not yet considered fully vaccinated (in accordance with the definition of fully vaccinated above).

3.c. I have submitted proof of vaccination to my supervisor.
Proof of vaccination includes a copy of the record of immunization from a health care provider or pharmacy; a copy of the COVID-19 Vaccination Record Card; a copy of medical records documenting the vaccination; a copy of immunization records from a public health or state immunization information system; or a copy of any other official documentation. Employees may provide a digital copy of such records, including, for example, a digital photograph, scanned image, or PDF of such a record that is clear and legible.

3.d. I have not received any vaccination doses.

3.e. I have submitted a request for exemption from vaccination and a decision is still pending.

3.f. I have an approved exemption from vaccination.

This section is only for employees that are considered partially vaccinated as defined above.

4. EMPLOYEE VACCINE INFORMATION (Employees checking block 3.a. should skip block 4 and go to block 5):

4.a. VACCINE MANUFACTURER(S) OR VACCINE PRODUCT NAME(S):

Pfizer-BioNTech/Cominavy 4.b. DATE OF FIRST DOSE: _____

Moderna 4.c. DATE OF SECOND DOSE (if two-dose vaccine): _____

AstraZeneca/Oxford

Johnson and Johnson (J&J/Janssen) 4.d. DATE FULLY VACCINATED: _____

Novavax

Other U.S. Food and Drug Administration licensed or authorized, World Health Organization Emergency Use listed vaccine or U.S. site clinical trial vaccine (provide name): _____

Other Vaccine Name: _____
Maximum of 23 characters. Only alphanumeric, dashes, and parentheses are allowed.

If 3b is selected Section 4 will be required

3. PLEASE CHECK ALL THAT COINCIDES WITH YOUR COVID-19 VACCINATION STATUS:

3.a. I am fully vaccinated.
Individuals are considered "fully vaccinated" two weeks after completing the second dose of a two-dose COVID-19 vaccine or two weeks after receiving a single dose of a one-dose vaccine. Accepted COVID-19 vaccines are those which have received a license or emergency use authorization from the U.S. Food and Drug Administration and those COVID-19 vaccines on the World Health Organization Emergency Use Listing. "Fully vaccinated" also includes circumstances in which the individual was a participant in a U.S. site clinical trial and has received all recommended doses.

3.b. I have received one or more doses, but I am not yet considered fully vaccinated (in accordance with the definition of fully vaccinated above).

3.c. I have submitted proof of vaccination to my supervisor.
Proof of vaccination includes a copy of the record of immunization from a health care provider or pharmacy; a copy of the COVID-19 Vaccination Record Card; a copy of medical records documenting the vaccination; a copy of immunization records from a public health or state immunization information system; or a copy of any other official documentation. Employees may provide a digital copy of such records, including, for example, a digital photograph, scanned image, or PDF of such a record that is clear and legible.

3.d. I have not received any vaccination doses.

3.e. I have submitted a request for exemption from vaccination and a decision is still pending.

3.f. I have an approved exemption from vaccination.

4. EMPLOYEE VACCINE INFORMATION (Employees checking block 3.a. should skip block 4 and go to block 5):

4.a. VACCINE MANUFACTURER(S) OR VACCINE PRODUCT NAME(S):

Pfizer-BioNTech/Cominavy 4.b. DATE OF FIRST DOSE: _____

Moderna 4.c. DATE OF SECOND DOSE (if two-dose vaccine): _____

AstraZeneca/Oxford

Johnson and Johnson (J&J/Janssen) 4.d. DATE FULLY VACCINATED: _____

Novavax

Other U.S. Food and Drug Administration licensed or authorized, World Health Organization Emergency Use listed vaccine or U.S. site clinical trial vaccine (provide name): _____

Other Vaccine Name: _____
Maximum of 23 characters. Only alphanumeric, dashes, and parentheses are allowed.

Once section 3 and 4 (if required) are filled out the certification in block 5 must be checked

5. I CERTIFY THAT THE INFORMATION I HAVE PROVIDED ON THIS FORM IS TRUE AND ACCURATE. I UNDERSTAND THAT PROVIDING FALSE INFORMATION IS A VIOLATION OF FEDERAL POLICY AND MAY BE SUBJECT TO DISCIPLINARY ACTION, INCLUDING DEBARMENT OR REMOVAL FROM FEDERAL SERVICE.

I certify that the information I have provided on this form is true and accurate. I understand that providing false information is a violation of federal policy and may be subject to disciplinary action, including debarment or removal from federal service.

6. CIVILIAN EMPLOYEE SIGNATURE: _____

7. DATE: _____

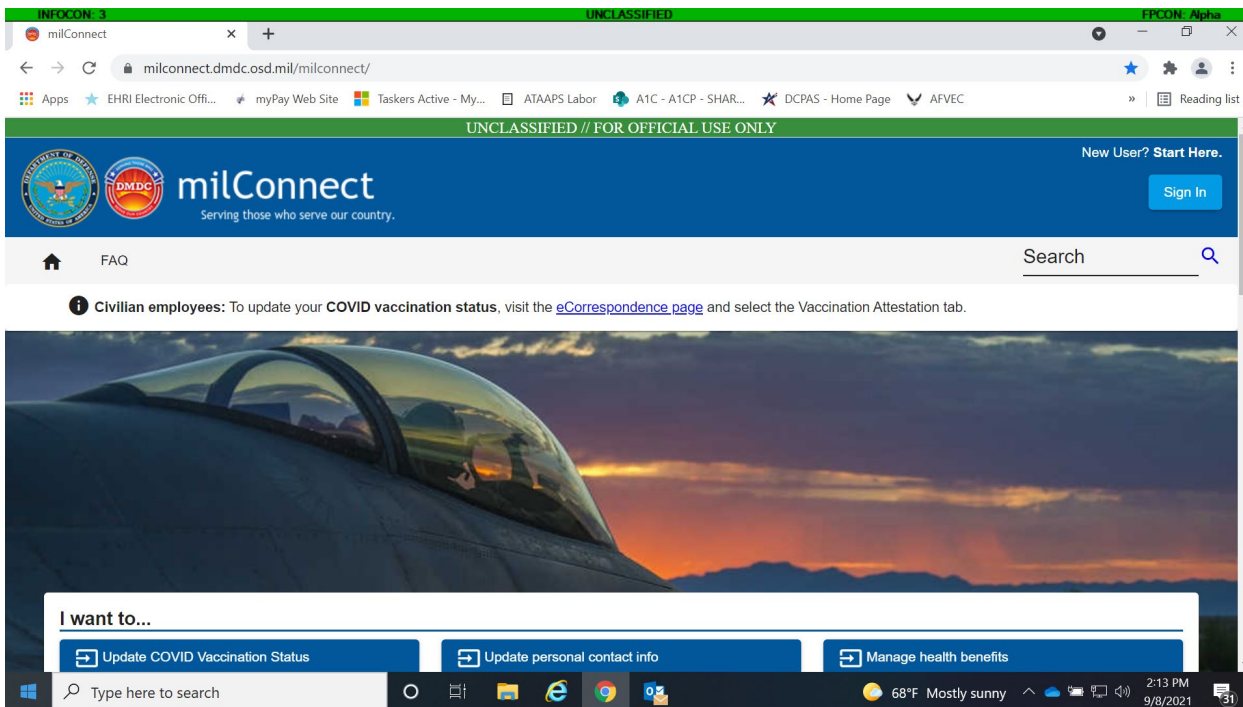
8. SUPERVISOR SIGNATURE: _____

9. DATE: _____

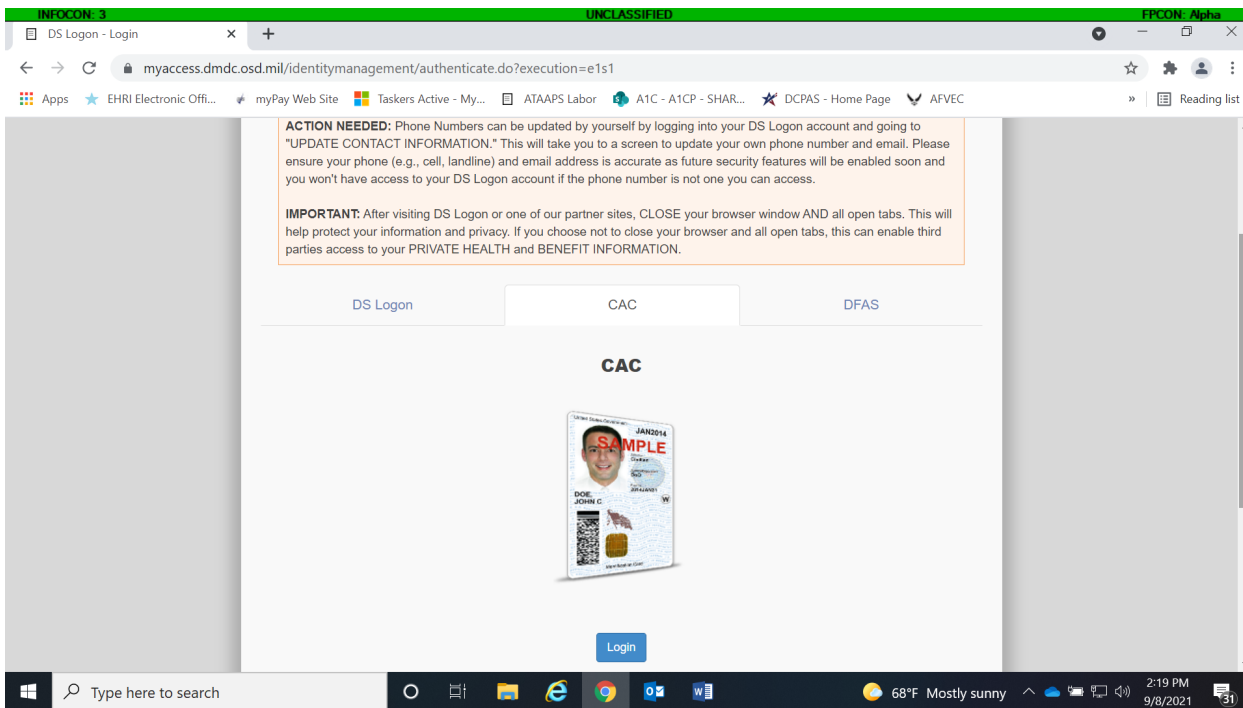
Attachment 2 – Electronic DD Form 3175 & 3150 User Guides

Electronic DD Form 3150 User Guide

Go to <https://milconnect.dmdc.osd.mil/milconnect/>

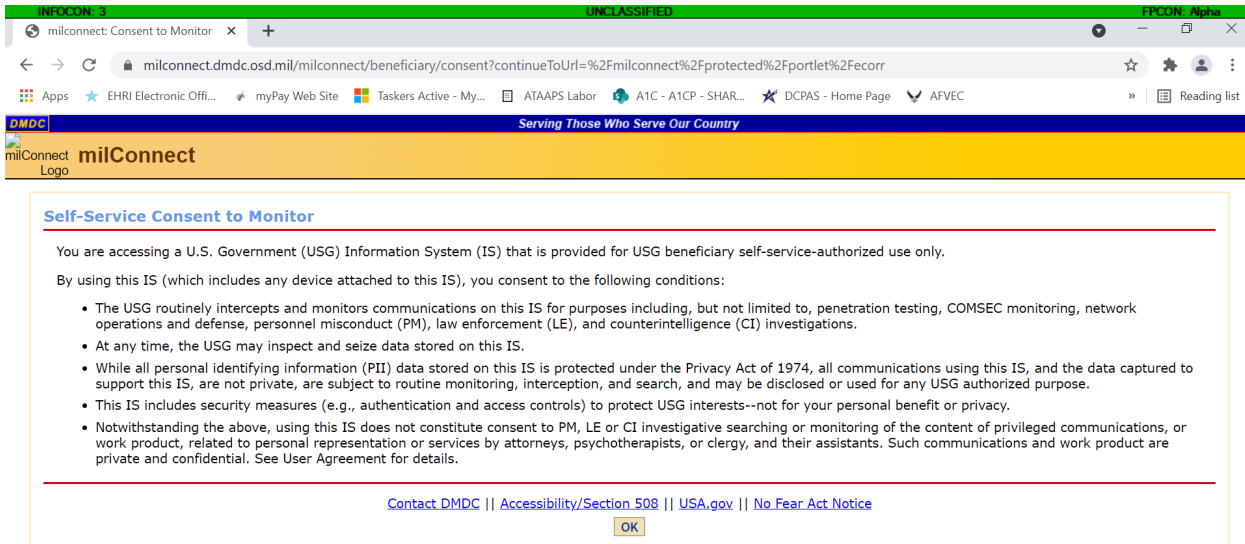


1. Click Update COVID Vaccination Status (Under “I want to”.....)

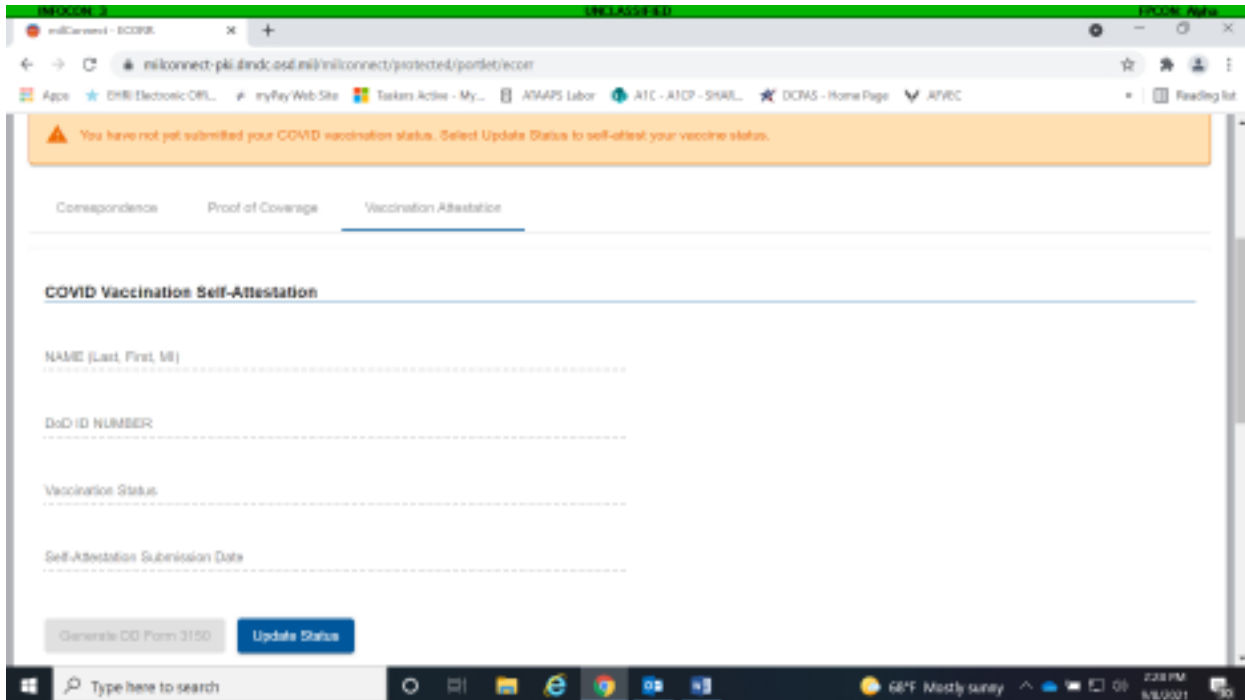


Attachment 2 – Electronic DD Form 3175 & 3150 User Guides

2) Select CAC, click Login, then enter pin



3) Read Self-Service Consent and click OK



Attachment 2 – Electronic DD Form 3175 & 3150 User Guides

4) Tab over and select Vaccination Attestation and click Update Status

COVID Vaccination Self-Attestation

CERTIFICATION OF VACCINATION

AGENCY DISCLOSURE NOTICE

The public reporting burden for this collection of information is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering information, Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, VA informationcollections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of

PRIVACY ACT STATEMENT

Authority: DoD is authorized to collect the information on this form pursuant to Executive Order (E.O.) 13991, Protecting the Federal Workforce and Requiring Mask-Wearing and E.O. 12196, U.S.C. 136, 10 U.S.C. 7013, 10 U.S.C. 8013, 10 U.S.C. 9013, 10 U.S.C. 2672, 5 U.S.C. chapters 11, and 79, and DoD Instruction 6200.03.

Principal Purpose: This information is being collected and maintained to implement Coronavirus Disease 2019 (COVID-19) workplace safety plans, including DoD's COVID-19 testing program facilities and environments, consistent with the above-referenced authorities, the COVID-19 Workplace Safety: Agency Model Safety Principles established by the Safer Federal Workforce Task Occupational Safety and Health Administration.

Routine Use(s): While the information requested on this form is intended to be used primarily for internal purposes, in certain circumstances it may be necessary to disclose this information external necessary and relevant to notify them of, respond to, or guard against a public health emergency or other similar crisis, including to comply with laws governing the reporting of communicable diseases (e.g., the Merit System Protection Board), arbitrators, and hearing examiners to the extent necessary to carry out their authorized duties regarding Federal employment; contractors, grantees, a government; agencies, courts, and persons as necessary and relevant in the course of litigation, and as necessary and in accordance with requirements for law enforcement; or to a person authorized System of Records Notice (SORN) associated with the collection of this information. For most Federal employees: OPM/GOVT-10, Employee Medical File System of Records, [75 Fed. Reg. 35](#); Federal employees not covered by OPM/GOVT-10, contractors, and other DoD-affiliated persons: DPR 39 DoD, DoD Personnel Accountability and Assessment System of Records, [85 Fed. Reg. https://dpcld.defense.gov/Portals/49/Documents/Privacy/SORNs/OSDJS/DPR-39-DoD.pdf](#)).

INSTRUCTIONS: This form should be completed by civilian employees, onsite contractor employees, and other individuals if required in accordance with current DoD Force Health Protection C

1. NAME (Last, First, MI)

3. PLEASE CHECK THE BOX BELOW THAT COINCIDES WITH YOUR VACCINATION STATUS:

I am fully vaccinated. Individuals are considered "fully vaccinated" two weeks after completing the second dose of a two-dose COVID-19 vaccine (e.g., Pfizer-BioNTech or Moderna) or two weeks after receiving a single-dose COVID-19 vaccine (e.g., Johnson & Johnson).

I am not yet fully vaccinated. I received my first dose of Moderna or Pfizer and my second appointment is scheduled, or I received my first dose of any vaccine less than two weeks ago.

I have not been vaccinated.

I decline to respond.

Individuals who choose not to complete the form will be assumed to be not fully vaccinated for purposes of application of the safety protocols. If you are not vaccinated due to medical or religious reasons, if you have already received one dose of a vaccine, but are not yet fully vaccinated, or if you received your first dose less than two weeks ago, then you will be treated as not fully vaccinated or not vaccinated.

I attest that the information provided in this form is accurate and true to the best of my knowledge.

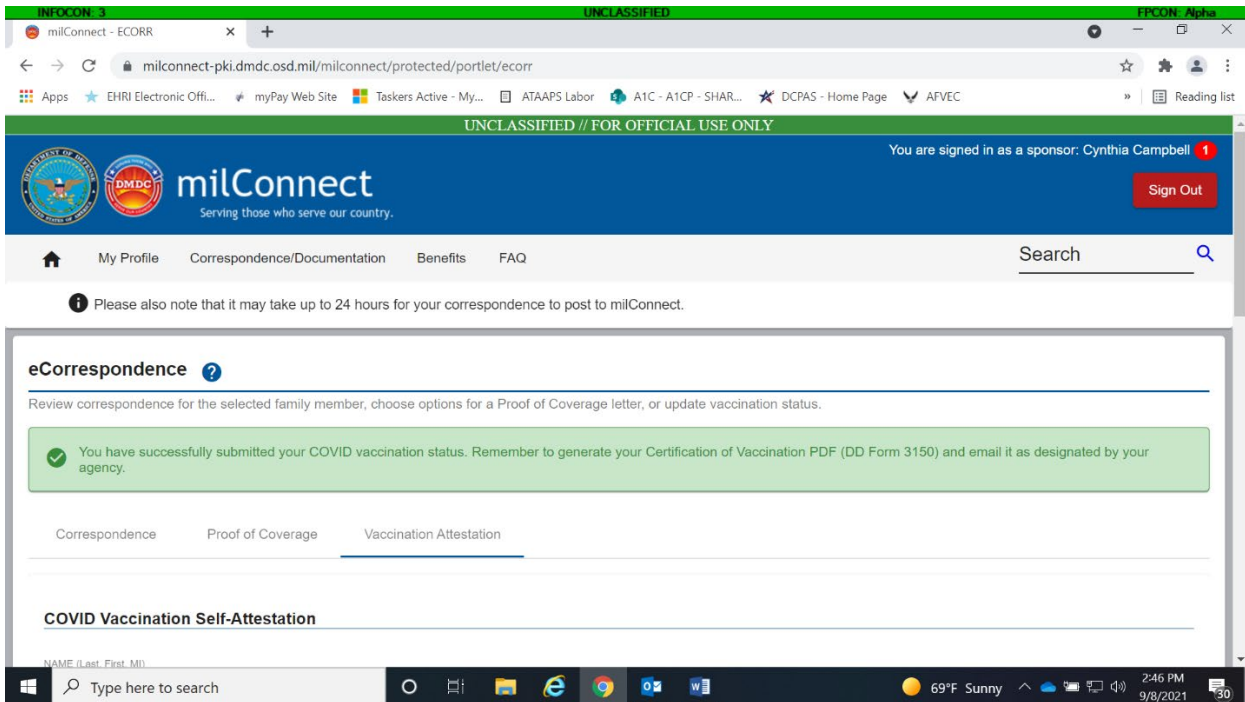
I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both (18 U.S.C. 1001). Checking "I decline to respond" does not constitute a false statement.

4. Self-Attestation Submission Date
2021-09-03

Cancel Submit Status

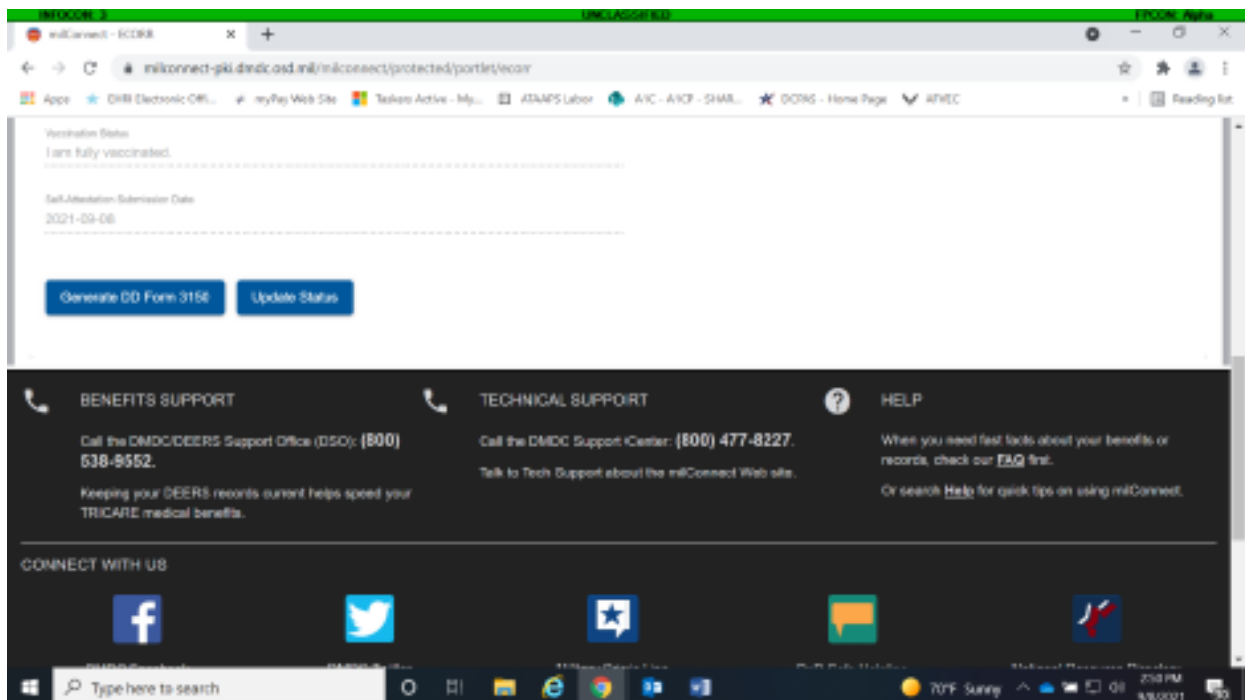
Attachment 2 – Electronic DD Form 3175 & 3150 User Guides

5) Complete Certification of Vaccination Section 3 and click Submit Status
(Please Note: Section 1 (Name); Section 2 (DoD ID Number); and Section 4 (Self-Attestation Completion Date) will auto populate)



The screenshot shows the milConnect website interface. At the top, there is a navigation bar with the milConnect logo and the tagline "Serving those who serve our country." The user is signed in as Cynthia Campbell. Below the navigation bar, there is a message: "Please also note that it may take up to 24 hours for your correspondence to post to milConnect." The main content area is titled "eCorrespondence" and contains a green notification box with a checkmark: "You have successfully submitted your COVID vaccination status. Remember to generate your Certification of Vaccination PDF (DD Form 3150) and email it as designated by your agency." Below this, there are tabs for "Correspondence", "Proof of Coverage", and "Vaccination Attestation". The "Vaccination Attestation" tab is selected, showing a "COVID Vaccination Self-Attestation" form. The form includes a "NAME (Last, First, MI)" field and a "Vaccination Status" section with the text "I am fully vaccinated." and a "Self-Attestation Submission Date" of "2021-09-08". At the bottom of the form, there are two buttons: "Generate DD Form 3150" and "Update Status".

You should receive the following message, "You have successfully submitted your COVID vaccination status. Remember to generate your Certification of Vaccination PDF (DD Form 3150) and email it as designated by your agency."



The screenshot shows the milConnect website interface, specifically the "Vaccination Status" section. The status is "I am fully vaccinated." and the "Self-Attestation Submission Date" is "2021-09-08". Below this, there are two buttons: "Generate DD Form 3150" and "Update Status". The bottom of the page features a footer with contact information for "BENEFITS SUPPORT", "TECHNICAL SUPPORT", and "HELP". The "BENEFITS SUPPORT" section includes the phone number (800) 638-9552. The "TECHNICAL SUPPORT" section includes the phone number (800) 477-8227. The "HELP" section includes a link to the FAQ and a search function. The footer also includes social media icons for Facebook, Twitter, and LinkedIn, and a "CONNECT WITH US" section.

After initial completion/submission of the form, you can generate for download a copy of your DD Form 3150 or you can update your status at any time.

COVID-19 Home Test Kits

Ordering Procedures

DLA has awarded contracts to three manufacturers for COVID-19 Home Tests. This guide serves as ordering instructions for all federally funded agencies, except Health and Human Services (HHS) and those supported by HHS, requiring COVID-19 Home Tests. The contract is structured to provide a percentage of awards to each vendor based on the terms and conditions of the statement of work. At any given time one or more of the items may not be available to order due to allocations to each vendor.

Two of the manufacturers' items **Quidel Corporation** and **Orasure Technologies** will be available to order through direct delivery. **Abbott Rapid DX** and **Quidel Corporation** home tests are available from the DLA Depot. Estimated delivery is 7 days (10 days for Orasure) after receipt of an order to CONUS destinations and the Medical Air Bridge for OCONUS. Quidel ships OCONUS and the lead time is 10 days. **The ESD is system generated, anything greater than 15 days is erroneous. As stated the delivery is 7-10 days after receipt of the order.** Orasure IntelliSwab™ are not currently available. We recommend you order either the BinaxNOW or QuickVue. Maximum shelf-life can not be guaranteed.

The items have been assigned NSNs and are eligible for ordering through FedMall, MILSTRIP or ECAT as applicable and when available. The Abbott BinaxNOW should be ordered through FedMall/MILSTRIP using a 2L advice code, the QuickVue and IntelliSwab can be ordered through FedMall, MILSTRIP or ECAT. If the ordering system allows please include project code "3AZ." No matter what method is used to place your order, please remember to post receipt upon physical receipt of the material.

- **FedMall Ordering** - For those Federal customers who typically do not use DLA Troop Support Medical's ECAT system to place Orders, FedMall is available for you. Access FedMall at <https://www.fedmall.mil/>. Once orders are placed in FedMall, the orders will be routed to ECAT for order execution. Please see page 4 for additional tips and instructions.
- **ECAT Web Users** - the Quidel and Orasure NSNs below will be available to you when you search for items.
- **DMLSS/TEWLS Users** - the NSNs below are in the Medical Master Catalog (MMC) and are available for you to source.

NSN	Nomenclature	Manufacturer	P/N	UOI	Notes	CONUS Price	OCONUS Price
6550016976662	QuickVue At-Home OTC COVID-19 Test	Quidel Corporation	20402	KT	(2 tests per kit)	\$11.83	\$15.67
6550016976646	IntelliSwab™ COVID-19 ST OTC US	Orasure Technologies	10-11-0632	CS	1 CS = 24 KT (2 Tests per kit)	\$254.82	\$337.52
6550016976628	BinaxNOW COVID-19 Antigen Self Test	Abbott Rapid DX	195-260	CS	1 CS = 6 KT (2 tests per kit)	\$106.75	\$106.75

NOTE: If you get a cancellation for one item please reorder one of the other items that are available. We appreciate your patience as we ensure that each vendor receives the percentage as laid out in the contract. Each week we will update the ordering guide and advise as to which items will be available for ordering.

COVID-19 Home Test Kits

6550-01-697-6662 - Quidel QuickVue At-Home OTC COVID-19 Test

Manufacturer: Quidel Corporation,

Manufacturer Part Number: 20402

Sample type: Anterior nares swab. Dipstick test format; results in as little as 10 minutes.

Two-color results - blue control line and red test line; easy to read and interpret. All components included in kit - Ready to use, no need for additional equipment. Contains built-in procedural control features. Intended for the qualitative detection with or without symptoms.

For use under FDA Emergency use Authorizations

Actual packaging and components may vary from picture

Unit of Issue: KT (contains supplies to run 2 tests; intended for one person to run test twice with 24-36 hours in between tests)

Shelf-life: 24 months from date of manufacture



6550-01-697-6646 - Orasure IntelliSwab™ COVID-19 ST OTC US

Manufacturer: Orasure Technologies

Manufacturer Part Number: 1001-0622

Sample Type: OTC Two-test rapid antigen test kit; Swab nostrils with gentle swab, swirl in the tube, and see results in 30-40 minutes. Unit box containing: Divided Pouch (2) - Each Containing: Test Device (1), Absorbent Packet (1), Developer Solution Vial (1) - (each vial contains 0.75 mL of a buffered saline solution with an antimicrobial agent); Test Stand (1); Positive Results Reference Card (1); Instructions for Use (in English and Spanish)

Unit of Issue: Case (CS) 1 CS = 24 KT (1 KT contains supplies to run 2 tests; intended for one person to run test twice with 24-36 hours in between tests)

Shelf-life: 9 months from date of manufacture



6550-01-697-6628 - Abbott BinaxNow COVID-19 Antigen Self Test

Manufacturer: Abbott Rapid DX

Manufacturer Part Number:

Sample Type: Anterior nasal (nares) swab sample; each box contains 2 test kits, each test kit consists of a card, a swab, and an individual small bottle of reagent; results in 15-30 mins; self-collected direct anterior nasal (nares) swab samples from individuals aged 15 years or older or adult collected anterior nasal swab samples from individuals aged two years or older. Test type: Lateral flow immunoassay.

Intended for the qualitative detection with or without symptoms.

Unit of Issue: Case (CS) 1 CS = 6 KT (1 KT contains supplies to run 2 tests; intended for one person to run test twice with 24-36 hours in between tests)

Shelf-life: 9 months from date of manufacture



Points of Contact

If you require assistance with ordering or status of orders, please contact the following DLA points of contacts:

FedMall users the PIIIE Help Desk can assist the registration process. Status and additional ordering assistance can be provided by DLA Troop Support Medical or DLA's Contact Center

- PIIIE Registration / Login issues, contact the PIIIE Help Desk:
 - Email: disa.global.servicedesk.mbx.eb-ticket-requests@mail.mil
 - PIIIE help desk at 1-866-618-5988

- DLA Troop Support

Area	POC	Email	Phone	Cell
FedMall Customers	Yvonne Poplawski	yvonne.poplawski@dla.mil	215-737-3102	215-298-2813
FedMall Customers	Stacy Perry	stacy.perry@dla.mil	215-737-3321	215-863-1002

- DLA Contact Center:
 - E-mail: dlacontactcenter@dla.mil
 - Telephone:
 - Toll Free: 877-DLA-CALL (877-352-2255)
 - Commercial: 269-704-7921

ECAT Web users

- E-mail: DSCPECATHELP@dla.mil
- Telephone:
 - Toll Free: 800-290-8201 (7:00 AM to 5:00 PM)
- Veterans Affairs
 - Trang Phan—thanh-trang.phan@dla.mil
 - Phone—215-737-9051
 - Cell—267-858-0424

DMLSS/TEWLS users can contact the ECAT Help Desk or the below:

Area	POC	Email	Phone	Cell
North Region	Annemarie Ervin	annemarie.ervin@dla.mil	215-737-3781	267-879-5303
South Region	Francis McGlinn Jr.	Francis.mcglinn2@dla.mil	215-737-2755	267-642-0840
West Region	Angela Atkinson	angela.atkinson@dla.mil	215-737-6033	267-355-3239
Fleet & Marines	Randy Owens	randall.owens@dla.mil	215-737-8704	267-374-7903
ECAT DoD	Marie Boggs	marie.boggs@dla.mil	215-737-4556	267-889-8821
DLA Depot	Maryann Bickel	Maryann.bickel@dla.mil	215-737-7241	267-251-6484

Ordering Tips for FedMall Users

DoDAAC Set up for Ordering

Prior to setting up your FedMall account, please verify that your DODAAC is authorized to requisition. To place **any** order, **MILSTRIP Or Purchase Card**, the DODAAC you've used to register for your FedMall account must have a "00" in the Authority Code.

To use your **Government Purchase Card (GPC)**, the DODAAC you use to set up your GPC Payment method in FedMall must have a "yes" in the Procurement Authority field. The DODAAC associated with your GPC payment method does not have to be the same as the DODAAC you use to register.

DAASINQ link verify DODAAC: <https://www.transactionservices.dla.mil/DAASINQ/default.asp>

Example below: The items in the red boxes are referred to above.

DODAAC INFORMATION		
DoDAAC:	[REDACTED]	UIC:
DODAAD SERVICE/AGENCY:	[REDACTED]	CREATION DATE: 03/20/2006
ORGANIZATION TYPE CODE:	DoD	DELETION DATE:
AUTHORITY CODE:	00 - Requisitioner	CONTRACTOR: No
MAJ COMMAND:		CONT ADMIN OFF: No
COCOM: USNORTHCOM		LAST UPDATE: 18-OCT-21
SUB TIER CODE:	[REDACTED]	CGAC: 097 - DEPARTMENT OF DEFENSE
PROCUREMENT AUTHORITY: Yes	GRANT AUTHORITY: No	FUNDING OFFICE: Yes
RIC:		

Searching in FedMall and Delivery Timeframes

- ◆ When searching for the NSNs in FedMall, do not include dashes i.e. 6550016976646—using dashes will result in the item not being found.
- ◆ NSNs 6550016976662 and 6550016976646 will not show stock on hand in FedMall since they are NOT depot stocked items. Lead times are 7 days after receipt of order regardless of what the FedMall or MILSTRIP status shows.
- ◆ **The ESD is system generated, anything greater than 15 days is erroneous. As stated the delivery is 7 -10 days after receipt of the order.**

Posting Goods Receipt via MRA:

If you ordered through FedMall, upon receiving the material, you will need to post Goods Receipt in FedMall in order to pay the vendor and generate your billing.

1. Log in to FedMall
2. Under "Tools" choose "Receive Orders/Requisitions MRA search:
 - a. "Search Mode" choose "DLA"
 - b. Input the Document number to "Document Number" box: document number (14 digits) is the number that made up by your DODAAC (6 digits)-Julian day (4 digits) and serial number (4 digits).
 - c. "Requisition date From": the date that you input the order, make sure the order date is included in the date range. then press "SEARCH"
3. ONLY receipt for the quantity delivered. If that quantity differs from the original order quantity, adjust the "Quantity Received" field to the quantity that was physically delivered to your facility.
4. If the entire quantity was delivered, simply check the "Final Indicator" box then hit submit.



**Department of Air Force
Civilian Force Management Directorate
AF/A1C
22 October 2021
Revision 2 Issued on 14 January 2022**

**FREQUENTLY ASKED QUESTIONS ON
DAF CIVILIAN EMPLOYEE MANDATORY
COVID-19 VACCINATION GUIDE**

Commanders, supervisors and DAF civilian employees are all encouraged to review the guidance and information from the Safer Federal Workforce Task Force, which can be accessed at <https://www.saferfederalworkforce.gov/>.

Q1. Are supervisors or Commanders authorized to *order* civilian employees to get vaccinated?

A1. Yes. Per President Biden's Executive Order 14043, DoD civilian employees must be fully vaccinated, except in limited circumstances where an employee is legally entitled to an accommodation for disability or medical condition, or sincerely held religious beliefs, practices or observances. Subsequently, DAF civilian employees may be ordered to take the necessary actions to comply with the Executive Order.

Q2. Are supervisors or Commanders authorized to offer civilian employees vaccination against COVID-19 through DoD sources?

A2. Yes. DAF civilian employees are eligible to receive the COVID-19 vaccine at any DoD vaccination site, including military medical treatment facilities. DAF civilian employees and contractor personnel are not *required* to receive vaccinations at their worksites. DAF civilian employees may *opt* to obtain COVID-19 vaccination through private providers, including locations such as retail pharmacies, private medical practices, and/or local and State public health department sites. If vaccination is offered to a DAF civilian employee through a DoD source at no cost to the employee, then the employee will not be eligible for reimbursement of the cost to get vaccinated if they opt to do so through their private provider.

Q3. By itself, does vaccination mean a person is safe (either from getting infected or from transmitting the virus) to be in the workplace?

A3. Not necessarily. These Novel vaccines are designed to protect people from severe COVID-19 disease and death. No vaccine is 100% effective; therefore Commanders must continue to implement/use all available mitigation strategies (i.e. maximizing telework, enforcing mandatory mask wearing for all individuals, physical distancing, etc.), continue to protect vulnerable populations, and use both mandatory and voluntary expanded testing capacity to surveil and protect the Total Force and our families. Managers and employees are also reminded that maximum vaccine efficacy isn't achieved until after a period of time (approximately 2 weeks) has passed following administration of the final dose (applies to the currently fully approved and

EUA-approved vaccines). Employees should also consult with their medical providers regarding risks associated with, and timing of, returning to regular worksites.

Q4. As more and more of the population gets vaccinated, can Commanders/supervisors require employees to return to the regular worksite even though they have self-identified as being at higher risk of serious complications or are members of CDC recognized “special populations”?

A4. Although risk from contracting severe disease/dying might be significantly reduced after completing the vaccination regimen, no vaccine is 100% effective, so anyone considered at higher risk of severe complications from COVID-19 continues to be considered as such under current CDC guidance. We also do not yet have sufficient data to know to what extent the vaccines will keep people from contracting COVID-19 and becoming severely ill or from transmitting the virus, or whether the current vaccines have similar efficacy against new variants of the virus. CDC guidance still calls for following all possible non-pharmaceutical interventions whether employees are vaccinated or not. Additionally, per existing DAF guidance, effective safeguards and mitigation measures must be put into place to ensure civilian employees who are required to work at traditional worksites are able to safely travel to and from work and perform their jobs in a safe manner. Status of the vaccination program is *only one factor* that contributes to any decision to progress towards recalling more civilian employees to traditional worksites, but shall not be used as a determinative factor. Commanders should make determinations in consideration of numerous factors, especially considering the current HPCON levels for the installation. Commanders nevertheless retain the ability to recall civilian employees to the workplace to meet mission-essential requirements, even though such action may be outside the scope of the phased return to optimized operations. In addition, a civilian employee who is at higher risk of serious complications from COVID-19, or who is a member of a special population, as defined by the CDC, may legally be entitled to reasonable accommodation under the Rehabilitation Act of 1973 (as amended by the Americans with Disabilities Act).

Q5. My civilian employee got vaccinated before the mandate and was granted administrative leave to obtain both doses of their vaccination. Now he wants to accompany his family member to get vaccinated. Does he have to take personal leave to do so?

A5. No. As of July 29, 2021, administrative leave was authorized for civilian employees to accompany family members for the purpose of the family member receiving the COVID-19 vaccination from DoD, Federal, State or local government organizations, or private health care organizations and pharmacies, up to 4 hours per vaccination event. This time includes travel to/from the vaccination site as well as the time to get vaccinated. However, if a family member experiences an adverse reaction to the vaccination and requires the employee’s presence and/or care, the employee should request sick leave for family care.

Q6. What if it takes less than 4 hours for the family member to get the vaccination? Or if it takes more than 4 hours?

A6. Employees are only authorized the administrative leave to accompany their family member to obtain the vaccination, so if it takes less than 4 hours, the employee should only be granted that amount of time it actually took. Additionally, it should generally not require more than 4 hours to obtain the vaccination. However, if there are unusual circumstances (such as extended

commuting time to the vaccination site, or extended waiting time at the site), employees may be granted additional administrative leave on a case-by-case basis.

Q7. I know civilian employees are supposed to be on official duty time to get vaccinated. What if an employee can only get vaccinated during non-work hours (e.g., an off-shift worker)? Can employees get overtime or compensatory time off for time spent outside of working hours to get vaccinated?

A7. Commanders are encouraged to explore a variety of options to facilitate their employees' ability to get vaccinated on official duty time, such as making adjustments to their work schedules (where practicable), and holding vaccination events at the worksite (although civilian employees cannot be required to get vaccinated at the worksite). However, if, due to unforeseen circumstances, a DAF civilian employee is unable to obtain vaccination during their basic tour of duty hours, the normal overtime hours of work rules apply.

Q8. What if an employee's family member can only get vaccinated during non-work hours (e.g., an off-shift worker)? Can employees get overtime or compensatory time off for time spent outside of working hours to accompany their family members to get vaccinated?

A8. No. If an employee accompanies their family member to a vaccination event outside their scheduled work hours, they will not be granted overtime pay or compensatory time off.

Q9. What time and attendance code should be used to document administrative leave granted for an employee to accompany a family member to a COVID-19 vaccination event?

A9. Per DoD guidance, the code for physical fitness should be used; specifically, "LN" for administrative leave and the environmental/hazard/other subcode of "PF".

Q10. What time and attendance code should be used to document administrative leave granted for a DAF civilian employee who experiences an adverse reaction to a COVID-19 vaccination event?

A10. Per DoD guidance, the code for physical fitness should be used; specifically, "LN" for administrative leave and the environmental/hazard/other subcode of "PF".

Q11. If full vaccination requires an employee's family member to receive two doses at two separate vaccination events, will the employee be granted four hours of administrative leave for each vaccination event?

A11. Yes. If an employee's family member's vaccination requires two events, up to four hours of administrative leave will be granted for each event.

Q12. What about booster shots? Will the employee be on official duty time to obtain a vaccination booster?

A12. No. **Because booster shots are not currently mandatory, official duty time is not appropriate.** An employee will be granted administrative leave (up to 4 hours per booster event) for the purpose of receiving any authorized COVID-19 vaccine booster shot. The 4 hours will cover travel as well as the time at the vaccination site. Employees will not be credited with administrative leave or overtime work for time getting a booster shot outside of their tour of duty. Similarly, an employee will be granted up to four hours of administrative leave for the purpose of accompanying a family member to obtain a COVID-19 booster vaccination. **If booster shots are mandated in the future, then official duty time would then be appropriate.**

Q13. If an employee's family member is unable to receive the vaccine when they arrive for their appointment, is the employee eligible to receive additional administrative leave for a rescheduled appointment?

A13. Yes, at the supervisor's discretion. Generally, an employee's family member will require no more than two vaccination events and will be granted no more than four hours of administrative leave to cover each vaccination event. However, a supervisor may grant additional administrative leave as needed for extenuating circumstances. If, for some reason, an employee's family member is unable to receive their vaccine after traveling to the vaccination location, the supervisor has discretionary authority to grant additional administrative leave for that time.

Q14. Will employees be reimbursed for travel expenses if they must travel to a vaccination site outside of the normal commuting area to get their own vaccination?

A14. Not generally. If vaccination is offered and available through DoD sources locally, employees may not be reimbursed for expenses related to obtaining the vaccine from a private source, and this would include any travel-related expenses. No reimbursement is authorized for expenses incurred for family member vaccinations.

Q15. My employee's vaccination appointment is scheduled during a time when I am unable to release her from performing her duties. Can I deny the employee's official duty time for a scheduled vaccination appointment?

A15. Supervisors may require employees to provide advance notice of anticipated absences and may, in certain circumstances, disapprove these requests. However, supervisors should keep in mind that getting the workforce vaccinated in accordance with the mandated deadlines is a high priority of the DAF. Moreover, 2nd doses medically must be administered within specified time frames after the 1st dose. Consequently, supervisors should only disapprove time away for vaccinations under truly mission critical circumstances. Finally, DoD guidance is that employees will be granted official duty time to obtain vaccinations; therefore, if a Commander or supervisor must disapprove a request due to mission critical circumstances, they must provide other opportunities for the employee to use the duty time necessary to get vaccinated.

Q16. What if an employee used personal leave to accompany their family member to get vaccinated before we began granting administrative leave for this purpose. Can employees use administrative leave retroactively?

A16. Yes. Employees who accompanied family members to get vaccinated prior to the date of the memorandum are authorized to retroactively substitute administrative leave for personal leave taken for the vaccination event. However, no retroactive administrative leave is authorized for any family member vaccination events prior to July 29, 2021. The retroactive substitution is subject to the same limitations as outlined herein.

Q17. What if an employee's family member experiences side effects and becomes ill after receiving the vaccine? Will the employee be authorized up to 2 days of administrative leave for the period of the family member's illness and/or recovery?

A17. No. If a family member experiences an adverse reaction to the vaccination and requires the employee's presence and/or care, the employee should request sick leave for family care.

Q18. The American Rescue Plan Act of 2021 (ARPA) authorized federal Agencies to grant emergency paid leave (EPL) and seek reimbursement from the Emergency Federal Employee Leave Fund for vaccine administration and recovery from illness related to vaccination. Can employees still utilize EPL?

A18. No. EPL was only authorized through September 30, 2021.

Q19. I have an employee who has requested a reasonable accommodation of being placed or continued on Weather/Safety Leave related to their higher risk of severe illness from COVID-19. With more and more people getting vaccinated, when can I require them to come back to work?

A19. There is no “one-size-fits-all” answer to this question. Each case and situation must be addressed according to the specific circumstances of that case, including the specific pandemic conditions at the workplace and in the community/region. Employees at higher risk of severe complications from COVID-19 may be entitled to a reasonable accommodation. See Chapter 13 of AFI 36-2710, *Equal Opportunity Program*. If an employee requests a reasonable accommodation, the interactive accommodation process must be engaged. Commanders and supervisors are also strongly encouraged to contact their servicing Disability Program Manager, civilian personnel and legal offices for assistance. While an employee may be determined to be entitled to an accommodation, they are not necessarily entitled to the accommodation of their choosing. Extended periods of weather and safety leave (WSL) is generally not appropriate as a reasonable accommodation. However, no employee should be removed from WSL without a thorough, individualized review that includes input from both the servicing legal office and the local disability program manager. Prior to removing an employee from WSL, supervisors must consider approved unpaid leave or reassignment as an appropriate reasonable accommodation.

Q20. I have been teleworking due to my worksite being closed and I am able to perform all of my job duties this way. Now that everyone is getting vaccinated, our office is reopening. Do I have to return to my traditional worksite, or can I continue to telework full time?

A20. It remains DAF policy to maximize telework whenever possible. Where employees are able to perform the full range of their duties through telework, or where there is not an urgent mission need for the remaining duties to be performed in the immediate future, Commanders and supervisors are encouraged to continue allowing telework. However, telework is not an entitlement and Commanders and supervisors retain authority to approve or disapprove telework arrangements.

Q21. May a supervisor ask employees if they have been vaccinated for COVID-19?

A21. Yes. Supervisors have responsibility for front-line implementation of workplace safety measures and therefore need information regarding their employee’s vaccination status. Likewise, unit Commanders have responsibility for implementing this guidance and establishing Force Health Protection guidelines and workplace safety measures and therefore also need this information for employees in their units. The DAF will obtain civilian vaccination status via the DD Form 3175, “Civilian Employee Certification of Vaccination,” (Attachment 3 of reference (a)), and accompanying vaccination documents as proof of the employee’s status. All DAF civilian employees (including onsite local national employees and Service members not on active duty who are DAF civilian employees), (regardless of whether they are authorized to telework or perform remote work), must attest to their vaccination status by completing the DD Form 3175 and provide accompanying vaccination documents as proof of their status.

Q22. May a commander or supervisor require proof of COVID-19 vaccination?

A22. Yes. All DAF civilian employees (including onsite local national employees and Service members not on active duty who are DAF civilian employees), (regardless of whether they are authorized to telework or perform remote work), must attest to their vaccination status by completing the DD Form 3175 “Civilian Employee Certification of Vaccination,” (Attachment 3 of reference (a)) **and provide accompanying vaccination documents as proof of their status.** The form completion process includes the submission of vaccination proof documents and subsequent supervisory verification of vaccination status.

Documentation to prove vaccination status may include (in accordance with references (b) and (c)):

- Copy of record of immunization from a health care provider or pharmacy; or
- Copy of COVID-19 Vaccination Record Card (CDC Form MLS-319813_r, published on September 3, 2020); or
- Copy of medical records documenting the vaccination; or
- Copy of immunization records from a public health or state immunization information system; or
- Copy of any other administratively acceptable official documentation containing the required data points for supervisory verification.

Administratively acceptable documentation must be identifiable to the employee (i.e., contain their name) and must contain the following required data points, which the supervisor must verify:

- Type of vaccine administered;
- Number of doses received;
- Date(s) of administration; and
- Name of the health care professional(s) or clinic site(s) administering the vaccine(s).

Proof of vaccination may be submitted in hard copy form or in an electronic format, and the proof may be a photocopy or photograph of the vaccination record, provided that it clearly and legibly displays the required data points listed above. Any format submitted must be capable of being retained by management.

Q23. Will employees need to take personal leave/sick leave days if they are required to quarantine as a result of travel?

A23. Employees should be aware that official or personal travel may result in a mandatory quarantine before they are allowed to return to the workplace. If quarantine is required because of official travel or workplace exposure, telework eligible employees should be required to telework, or if employees are not telework eligible, commanders should provide weather and safety leave, or other administrative leave. If quarantine is required because of personal travel, and the employee is otherwise expected to be present onsite, the employee should take personal leave while quarantining. If an employee refuses to quarantine or refuses to take personal leave while under mandatory quarantine **after personal travel**, a commander may elect to bar the employee from the workplace for the safety of others. If the commander bars the employee from the workplace, the employee must be placed on administrative leave until it is determined what status the employee should be placed in while on quarantine. Commanders, however, should avoid placing an employee on extended administrative leave in this situation and should act quickly to determine the appropriate status for the employee. Commanders and

supervisors are strongly encouraged to consult with their servicing civilian personnel and legal offices in these situations.

Q24. At this stage of the COVID-19 national emergency, how should Commanders and supervisors be administering weather and safety leave?

A24. The guidance OPM has provided on the use of weather and safety leave in connection with the COVID-19 pandemic is still applicable. In addition to identifying certain specific covered circumstances, OPM communicated the general principle that, subject to statutory and regulatory limitations, agencies may use available flexibilities to provide weather and safety leave in circumstances where allowing an employee to travel to or perform work at the normal worksite would pose significant safety risks for the employee, other employees, or the general public. Weather and safety leave should not be used when an employee is capable of teleworking (5 CFR 630.1605) or when the employee is sick with COVID-19 (unable to work/telework) or otherwise in circumstances under which sick leave is appropriate.

Q25. My employee isn't required to submit to a COVID-19 screening test but would like to get tested anyway. Am I required to give her official duty time and/or supply a government-funded test kit?

A25. No. When an employee is not required to be tested but decides to obtain a COVID-19 test at their own initiative, the employee may request sick leave or other available paid time off for that situation and should obtain the test using their own resources.

Q26. Are DAF civilian employees who are required to participate in the screening testing program limited in their ability to work onsite in between weekly tests?

A26. No, if they have met the applicable testing requirement and have not tested positive for COVID-19, employees participating in the screening testing program are not limited in their ability to work onsite between weekly tests, although they must comply with all relevant safety protocols for not-fully vaccinated individuals. However, if the employee has come into close contact with a person with COVID-19 during the time period in between screening tests, they should follow CDC guidelines for testing and quarantine and not enter a worksite. Similarly, if they have symptoms consistent with COVID-19, they should not enter a worksite.

Q27. What if an employee misses a required testing time, e.g. they are on leave that day?

A27. If an employee misses their regularly scheduled or required testing time, they must coordinate with their supervisor for testing within the required testing period, and in no case should they be permitted to enter the worksite unless they have a negative test result within the last 72 hours.

Q28. What if an employee refuses to submit to screening testing?

A28. If a DAF civilian employee who is not fully vaccinated refuses COVID-19 screening testing that has been mandated due to their vaccination status (including those with an approved vaccination exemption), supervisors may take appropriate corrective personnel action, including adverse employment action, up to and including removal from Federal service, (after consultation with servicing civilian personnel and legal offices). Commanders and supervisors may bar such employees from their worksites on the installation or facility to protect the safety of others, including while adverse action is pending. While barred from their worksites on the installation or facility, such employees may be required to telework, as appropriate. If commanders do not bar such employees from their worksites (due to critical mission needs),

they must ensure appropriate mitigation measures are in place to ensure the safety of all employees.

Q29. Guidance refers to denying individuals access to installations and facilities. Where should such denied access occur? Are we required to post monitors at building entrances?

A29. Commanders should establish procedures that best fit their facilities and circumstances. It is not expected that monitors will be posted at facility entrances. Rather, the primary responsibility for ensuring compliance lies with front line supervisors and unit commanders. Supervisors should monitor screening testing compliance and ensure that employees who should not be in the workplace are informed they are not to be there, and are promptly sent home if they do come in. **Additionally, Commanders are not required to bar employees from the workplace, but rather should evaluate the need to do so on case-by-case basis. Commanders and supervisors are encouraged to consult with their servicing legal and human resources offices prior to barring employees from the workplace and/or placing them on administrative leave.**

Q30. What if my employee claims to have a medical or religious objection or reason for not getting the COVID-19 vaccination?

A30. A DAF civilian employee may request an exemption from the requirement(s) herein on the basis of a medical condition or circumstance, or a sincerely held religious belief, practice or observance. Exemptions will be granted in limited circumstances and only where legally required.

If a DAF civilian employee has requested an exemption, (e.g., a reasonable accommodation based on a medical condition/disability or religious beliefs, practices, or observances) from any portion of this guidance, approval authorities (and consistent with DoD guidance, will be herein referred to as decision authorities) should determine if an appropriate flexibility or accommodation is legally required and can be provided.

While exemption requests are pending decision, employees should be granted a temporary delay in compliance with the vaccination mandate and no enforcement action should be taken during this time period. A religious or medical accommodation of exemption from COVID-19 vaccination is not an exemption from COVID-19 screening testing, or from other force health protection or workplace health and safety mitigation measures.

Q31. My employee has asked to be exempted from screening testing/mandated mask wear for religious reasons. What do I do?

A31. Similar to the above question and answer, a DAF civilian employee may request an exemption from screening testing or mandated mask wear on the basis of a medical condition or circumstance, or a sincerely held religious belief, practice or observance, and the same processes apply. It should be noted however, that religious accommodations are not the same as reasonable accommodations based on medical condition or disability because they are founded in different statutes and have different legal standards and requirements. There may be a "compelling need" for management to require testing and the wearing of masks, to protect the health of all Department of the Air Force (DAF) personnel, the communities we live and work in, and to preserve total force readiness and ensure mission accomplishment. Therefore, simply exempting employees from participating in testing or mask wear may not be appropriate,

particularly during periods, or in areas, of high or substantial transmission rates. Commanders should look for the "least restrictive method", or viable alternatives to exemptions, that allow for accommodation of the religious belief without putting others at risk. Examples of such possible alternatives include but are not limited to: telework; altering work schedules or cohorting; and reassignment to a different position or to different duties that may allow for telework. Only after all lesser restrictive alternatives have been considered and it is determined there is no viable alternative other than to require the employee to report to work, should an employee be compelled to submit to the testing/mask requirement.

Q32. When I originally completed the DD Form 3175, I was not fully vaccinated but now I am. How do I change my status?

A32. Employees who wish to change their status should update the electronic DD Form 3175 in milConnect, if milConnect was originally used by the employee. Otherwise, the employee should provide an updated hard copy DD Form 3175 to their supervisor (or designated human resources official) and ask that the original form be replaced with the updated version.

Q33. I believe my employee may have lied on their DD Form 3175. What should I do?

A33. The form completion process includes the submission of vaccination proof documents and supervisory verification of vaccination status. If, after review of the vaccination proof documents, there is still a reasonable belief the employee may have provided false information, the supervisor should immediately contact their servicing civilian personnel and legal offices for consultation. However, if an employee who has attested to being vaccinated exhibits symptoms of COVID-19 illness, the supervisor should apply the appropriate safety protocols, but this alone is generally not an appropriate reason to question the employee's vaccination status.

Q34. Should commanders allow individuals to update their vaccination status?

A34. Yes. In fact, DAF civilian employees are required to submit a new DD Form 3175 when their vaccination status changes. Care should be taken to update the form via MilConnect if that was the original entry method in order to ensure data integrity.

Q35. If a DAF civilian employee seeks to enter workspace under the control of another agency, must they complete a Civilian Employee Certification of Vaccination form at that agency?

A35. Yes, DAF employees are treated as visitors during their visit to another agency, meaning they would need to complete a Civilian Employee Certification of Vaccination form and, if they are not fully vaccinated, they would need to show proof of a negative COVID-19 test result within the past 72 hours. As with other visitors, the employee should keep the form with them during their time onsite at the other agency.

Q36. Are commanders and supervisors required to provide COVID-19 testing for work-related exposures? If so, are the screening self-test kits sufficient for this purpose?

A36. DAF civilian employees who have been exposed to persons with COVID-19 at work should receive diagnostic testing, (i.e., confirmatory laboratory-based molecular test.) The screening test kits should not be used for diagnostic purposes. If an employee believes they have been exposed and/or have become ill as a result of work-related incident, they may file a workers' compensation claim under the Federal Employees' Compensation Act (FECA). The employee should report the illness to their supervisor as soon as possible and the supervisor should remind the employee of the option to electronically file a form CA-1, Notice of Traumatic Injury,

via the U.S. Department of Labor's ECOMP system. Supervisors are responsible for requesting a CA-16, Authorization for Exam and/or Treatment, by calling the Total Force Service Center at 1-800-525-0102 or via email at injury.compensation@us.af.mil, if necessary, no later than 7 calendar days from the date of the injury. Employees are reminded that claims are adjudicated by the Department of Labor.

Q37. We have a new hire who hasn't yet onboarded but is due to do so very soon. They have stated their intent to submit a request for exemption (on medical or religious basis) from the vaccination mandate. What do we do?

A37. In accordance with reference (f), new DAF civilian employees must be fully vaccinated by their entry on duty (start) date or November 22, 2021, whichever is later. If a new hire intends to request a medical or religious exemption, their start date should be delayed until the exemption process is complete and they either have been approved for an exemption, or they become fully vaccinated. For new hire candidates with start dates prior to November 22, 2021, the local hiring official in coordination with the servicing Civilian Personnel office may determine whether to delay the start date pending confirmation that the new hire is fully vaccinated or will be by November 22, 2021. Additionally, for urgent, mission-critical hiring needs in circumstances in which an employee could not have been fully vaccinated between the time the job announcement closes and the employee's start date, temporary exemptions in writing for up to 60 days after an employee's start date may be approved by SecAF (and may be delegated no lower than the Under Secretary of the Air Force). Commanders may request SecAF (or designee) approval of such temporary exemptions of this requirement, and requests should be submitted through the MAJCOM chain of command to AF.A1C.Workflow@us.af.mil.

Q38. What about a transfer employee who is scheduled to PCS and intends to file for an exemption? What do we do?

A38. For purposes of paragraph 2.4, the term "new hire" includes current DAF civilian employees who are being hired into a new or different position, to include internal placement actions (i.e. reassignment, promotion, change to lower grade, and conversions). Consequently, they must be fully vaccinated, or have an approved exemption, prior to transferring into the position. Temporary exemptions in writing for up to 60 days after an employee's start date may be approved by SecAF (and may be delegated no lower than the Under Secretary of the Air Force), for urgent, mission-critical hiring needs in circumstances in which an employee could not have been fully vaccinated between the time the job announcement closes and the employee's start date. Commanders may request SecAF (or designee) approval of such temporary exemptions of this requirement, and requests should be submitted through the MAJCOM/FLDCOM chain of command to haf-es.workflow@us.af.mil. [Note: Such temporary exemptions do NOT cover any official travel associated with the on-boarding of the employee, including PCS travel; such official travel would require separate approval in accordance with section 10 of this guidance.]

Q39. One of my highest performing civilian employees is adamantly opposed to getting vaccinated, but not for a medical or religious-based reason. I would hate to lose this employee. Can't I grant an exemption to the requirement?

A39. No. The Executive Order does not permit exemptions from the vaccination requirement *except as required by law*. If the employee does not legally qualify for a medical or religious-based exemption, there is no authority to grant one.

Q40: What steps should a supervisor take when an employee has lost or does not have a copy of required vaccination documentation?

A40: If an employee states that they have lost their vaccination documentation or do not have a copy of it, they should be directed to contact the vaccination provider site where they received their vaccine. If the location where the employee received their COVID-19 vaccine is no longer operating, the employee should contact their health care provider, who, in most cases, can access a State or local health department's immunization information system (IIS) for the employee's record. In many States or localities, the employees may themselves be able to get their record by directly contacting the State or local health department's IIS. Employees should contact their State or local health department if they have additional questions about vaccination cards or vaccination records. If an employee was vaccinated in another country, the supervisor should direct the employee to contact the vaccination provider site where they received their vaccine for information on how to obtain records. Alternatively, the employee should contact the appropriate health department in that country. If an employee who claims they are fully vaccinated is able to demonstrate a good faith effort to locate required documentation, the supervisor may hold any disciplinary action associated with failure to comply with the vaccination requirement in abeyance for a short period of time, pending the employee's submission of documentation providing proof of vaccination.

Q41: What workplace safety protocols should we apply to an onsite contractor employee who is not fully vaccinated because the contractor employee has been provided an exception to the vaccination requirement by their employer?

A41: In most circumstances, DAF should require an onsite contractor employee who is not fully vaccinated to follow applicable masking, physical distancing, and testing protocols. However, there may be circumstances in which it is determined that the nature of an onsite contractor employee's job responsibilities at a DAF workplace, or the location of their work at a DAF workplace, requires heightened safety protocols. In some cases, DAF may determine that the nature of an onsite contractor employee's responsibilities at a DAF workplace are such that no safety protocol other than vaccination is adequate—in that case, an onsite contractor employee who is not fully vaccinated would be unable to perform the requisite work at the DAF workplace. Such circumstances do not relieve the contractor from meeting all contractual requirements. In order for commanders to assess appropriate safety measures for contractor employees in DAF workplaces, contractors subject to a contractual requirement for maintaining COVID-19 workplace safety protocols pursuant to Executive Order 14042 should generally notify their contracting officers when one of their employees who works onsite at a DAF workplace has received an exception to the requirement to be fully vaccinated.

Q42. I'm an Air Force Reserve Technician (ART) and I have questions regarding which rules and processes I follow, the ones for military members or the ones for DAF civilian employees. Where do I go for answers?

A42. Air Force Reserve personnel should contact AFRC/A1CE at afrc.dpce@us.af.mil.

Q43. I'm a National Guard Title 32 dual status military technician. Do I follow the DAF civilian employee vaccination guidance? What if I'm a Title 5 State level National Guard employee.

A43. No. Title 32 dual status technicians will follow directives and procedures issued by their respective service component supplemented by the Air National Guard or Army National Guard.

Title 5 State level National Guard employees should follow directives and procedures issued by the National Guard Bureau Technician and Civilian Personnel Policy Division (NGB-J1-TCP). Their published guidance can be found on their GKO site located at <https://gko.portal.ng.mil/joint/J1/D06/>. For additional Title 5 State level information, personnel should contact NGB-J1-TCP, Mr. Nick Hoyt at 703-607-3155 or nicholas.j.hoyt.civ@army.mil.

Q44. Can a Tentative Job Offer (TJO) be rescinded/pulled after an exemption request has been submitted by the selected candidate, but before the exemption request has been processed to final decision?

A44. No. A TJO may not be rescinded due to an exemption request being submitted. However, the EOD date cannot be determined/set until a decision is rendered on the exemption request.

Q45. If a current DAF employee, who has an approved exemption, is selected for a new position (either within or outside of the current organization), can the approved exemption be applied to the new position (i.e. does the exemption approval follow the employee to the new position)?

A45. No. Determining whether an exemption is legally required must be an individualized assessment of the particular facts and circumstances of the requesting employee's situation. It will include consideration of factors such as: the basis for the claim; the nature of the DAF civilian employee's job responsibilities; the impact, if any, of the volume of approved requests; and the potential effects on the DAF's mission and operations, including protecting other employees and the public from COVID-19. Because exemption request determinations must be based on individualized assessments, an approved exemption does not "transfer" with an employee from one job to another, or from one location to another. An employee should submit a new exemption request based on the new situational circumstances in such cases.

Q46. Does "Official Travel" include PCS-related travel?

A46. Yes. For the purposes of this guidance, travel related to PCS is considered "official travel" and is restricted for employees who are not fully vaccinated.

Q47. Can management elect to provide a Firm Job Offer (FJO) and set an EOD for a current DAF employee who has been selected and who has submitted a request for exemption from vaccinated, and remains unvaccinated pending disposition of that request?

A47. No. For purposes of this guidance, the term "new hire" includes current DAF civilian employees who are being hired into a new or different position, to include internal placement actions (i.e. reassignment, promotion, change to lower grade, and conversions). Therefore, management may not provide the employee an FJO or establish the EOD until the employee receives an approved exemption, becomes fully vaccinated, or receives approval for a temporary exemption (under paragraph 2.4 of this guidance).

Q48. Where do supervisors or Commanders go if they have additional questions regarding civilian employees?

A48. Commanders or supervisors should consult their servicing civilian personnel (Employee Relations), MTF, and/or Legal offices if they have additional questions. They are also encouraged to review the guidance and information in the DAF COVID-19 Commander's Toolkit at <https://usaf.dps.mil/teams/COVID-19/SitePages/Home.aspx> and from the Safer Federal Workforce Task Force, which can be accessed at <https://www.saferfederalworkforce.gov/>.



COVID-19

We have the tools to
Fight Omicron



Vaccines & Booster



Masks



Testing

Frequently Asked Questions about COVID-19 Vaccination

Updated Dec. 21, 2021

CDC has updated its recommendations for COVID-19 vaccines with a preference for people to receive an mRNA COVID-19 vaccine (Pfizer-BioNTech and Moderna). Read [CDC's media statement](#).

Below are answers to commonly asked questions about COVID-19 vaccination.

Have more questions? Visit [FAQs about Vaccination in Children](#) and [Myths and Facts about COVID-19 Vaccines](#).

Safety

Are COVID-19 vaccines safe even though the vaccines were developed rapidly? ^

While COVID-19 vaccines were developed rapidly, all steps were taken to make sure they are safe and effective:

- **Approach to Development** – Scientists have been working for many years to develop vaccines against viruses like the one that causes COVID-19. This knowledge helped speed up the initial development of the current COVID-19 vaccines.
- **Clinical Trials** – All vaccines in the United States must go through [three phases of clinical trials](#) to make sure they are safe and effective. During the development of COVID-19 vaccines, phases overlapped to speed up the process, but all phases were completed.
- **Authorization or Approval** – Before vaccines are available to people, the U.S. Food and Drug Administration (FDA) assesses the findings from clinical trials. FDA determined that [three COVID-19 vaccines](#) met FDA's safety and effectiveness standards and granted those vaccines [Emergency Use Authorizations \(EUAs\)](#) [↗](#). This allowed the vaccines to be quickly distributed to control the pandemic. Before recommending COVID-19 vaccination for children, scientists conducted clinical trials. The FDA gave the Pfizer-BioNTech COVID-19 vaccine emergency authorization to use in children ages 5 years through 15 years old and full approval to use in people ages 16 years and older. Read more about [the first COVID-19 vaccine to receive FDA approval](#) [↗](#).
- **Manufacturing and Distribution** – The U.S. government has invested substantial resources to manufacture and distribute COVID-19 vaccines. This allowed vaccine distribution to begin as soon as FDA authorized each vaccine.
- **Tracking Safety Using Vaccine Monitoring Systems** – COVID-19 vaccine safety monitoring has been the most intense and comprehensive in U.S. history. Hundreds of millions of people in the United States have received COVID-19 vaccines. Through several [monitoring systems](#), CDC and FDA continue to provide updated information on the [safety of these vaccines](#).

Learn more about [developing COVID-19 vaccines](#).

What are the ingredients in COVID-19 vaccines?

Vaccine ingredients vary by manufacturer. None of the vaccines contain eggs, gelatin, latex, or preservatives. All COVID-19 vaccines are **free from metals** such as iron, nickel, cobalt, lithium, and rare earth alloys. They are also free from manufactured products such as microelectronics, electrodes, carbon nanotubes, or nanowire semiconductors.

To learn more about the ingredients in authorized COVID-19 vaccines, see

- [Pfizer-BioNTech COVID-19 Vaccine Overview and Safety](#)
- [Moderna COVID-19 Vaccine Overview and Safety](#)
- [Johnson & Johnson's Janssen COVID-19 Vaccine Overview and Safety](#)
- [Ingredients Included in COVID-19 Vaccines](#)

If I am pregnant or planning to become pregnant, can I get a COVID-19 vaccine?

Yes, COVID-19 vaccination is recommended for [people who are pregnant](#), breastfeeding, trying to get pregnant now, or who [might become pregnant in the future](#). You might want to have a conversation with your healthcare provider about COVID-19 vaccination. While such a conversation might be helpful, it is not required before vaccination. Learn more about [vaccination considerations for people who are pregnant or breastfeeding](#).

If you are pregnant and have received a COVID-19 vaccine, we encourage you to enroll in [v-safe](#), CDC's smartphone-based tool that provides personalized health check-ins after vaccination. A [v-safe pregnancy registry](#) has been established to gather information on the health of pregnant people who have received a COVID-19 vaccine.

Why should my child get vaccinated against COVID-19?

Vaccinating children ages 5 years and older can help protect them from getting COVID-19, spreading the virus to others, and getting sick if they do get infected. While COVID-19 tends to be milder in children than adults, it can make children very sick, require hospitalization, and some children have even died. Children with underlying medical conditions are more at risk for severe illness compared to children without underlying medical conditions.

Getting your child vaccinated helps to protect your child and your family, including siblings who are not eligible for vaccination and family members who may be at risk of getting very sick if infected. Vaccination is now [recommended for everyone ages 5 years and older](#). Currently, the [Pfizer-BioNTech COVID-19 vaccine](#) is the only one available to children ages 5 years and older.

COVID-19 vaccines have been used under the most intensive safety monitoring in U.S. history. Scientists have conducted clinical trials with thousands of children, and the results show that COVID-19 vaccines are [safe](#) and [effective](#).

Your child cannot get COVID-19 from any COVID-19 vaccine, and there is no evidence that COVID-19 vaccines cause fertility problems.


Your child may have some [side effects](#), which are similar to those seen with other routine vaccines and are a normal sign that their body is building protection. These side effects may affect their ability to do daily activities, but they should go away in a few days. Some people have no side effects and severe allergic reactions are very rare.

Related pages:

- [COVID-19 Vaccines for Children and Teens](#)

- [Pfizer-BioNTech](#)
- [Possible Side Effects](#)
- [Families and Children](#)

Getting Your Vaccine

Do I need a booster? How many doses of COVID-19 vaccine will I need to get? 

COVID-19 Vaccine Primary Series

The number of vaccine doses you need depends on which vaccine you receive.

- Two doses of [Pfizer-BioNTech](#) vaccine should be given 3 weeks (21 days) apart.
- Two doses of [Moderna](#) vaccine should be given 4 weeks (28 days) apart.
- Only one dose of Johnson & Johnson's Janssen ([J&J/Janssen](#)) vaccine should be given.

If you receive a vaccine that requires two doses, you should [get your second shot as close to the recommended interval as possible](#). You should **not** get the second dose earlier than the recommended interval.

COVID-19 vaccines **are not** interchangeable for your COVID-19 vaccine primary series. If you received a Pfizer-BioNTech or Moderna COVID-19 vaccine for your first shot, you should get the same product for your second shot.

Additional Primary Dose If You Are Immunocompromised

If you received a Pfizer-BioNTech (ages 12 and older) or Moderna (ages 18 and older) mRNA COVID-19 vaccine primary series and have a moderately or severely compromised immune system, you should [receive an additional primary dose](#) of the same mRNA COVID-19 vaccine at least 28 days after the second dose.

Additional primary doses **are not** interchangeable. The vaccine used for the additional primary dose should be the same as the vaccine used for the primary vaccine series. If the mRNA vaccine product given for the first two doses is not available or is unknown, either mRNA COVID-19 vaccine product may be administered.


Currently, CDC does not recommend an **additional primary dose** if you received a single-dose J&J/Janssen COVID-19 vaccine or in children less than 12 years old with moderate or severely compromised immune systems.

Booster Shot

Everyone ages 16 years and older can get a [booster shot](#) after they have completed their COVID-19 vaccine primary series. People ages 16 to 17 years old can get the Pfizer-BioNTech COVID-19 booster shot.

People ages 18 years and older have the option to either get the same COVID-19 vaccine product as their primary series, or to get a different COVID-19 vaccine. People may have a preference for the vaccine type that they originally received, or they may prefer to get a different booster. CDC's recommendations now allow for this type of mix and match dosing for booster shots (Pfizer-BioNTech, Moderna, or J&J/Janssen) for people ages 18 years and older. You may consider the benefits and risks of each product and discuss with your healthcare provider which COVID-19 vaccine product is the most appropriate booster for you.

Currently, a booster shot is not recommended for [children younger than 16 years old](#).

If I didn't get my second shot of a 2-dose COVID-19 vaccine within the recommended time, what should I do? 

You should **get your second shot as close to the recommended 3-week or 4-week interval as possible**. There is currently limited information on the effectiveness of receiving your second shot later than 6 weeks after the first shot. However, if you receive your second shot of COVID-19 vaccine at any time after the recommended date, you do not have to restart the vaccine series, and you can be considered **fully vaccinated** 2 weeks after getting your second shot. This guidance might be updated as more information becomes available.

Learn more about [COVID-19 vaccines that require 2 shots](#).

How long does protection from a COVID-19 vaccine last?

We don't know yet how long COVID-19 vaccine protection lasts. Recent studies show that protection against the virus may decrease over time. This reduction in protection has led CDC to recommend that everyone ages 18 years and older get a booster shot after completing their primary vaccination series.

People who received the Pfizer-BioNTech or Moderna COVID-19 vaccine for their primary series should get a booster shot at least 6 months after completing the primary series. People who received Johnson & Johnson's Janssen COVID-19 vaccine should get a booster shot at least 2 months after getting their first shot.

At this time, CDC recommends getting only one COVID-19 booster shot. CDC continues to review evidence and will update guidance as more information is available.

Learn more about [COVID-19 vaccine booster shots](#).

Related page:

- [Vaccines Work](#)

Preparing for Your Vaccine

How long do I need to wait after getting a flu vaccine or another vaccine before getting a COVID-19 vaccine?

You can get a COVID-19 vaccine and other vaccines, including a [flu vaccine](#), at the same visit. Experience with other vaccines has shown that the way our bodies develop protection, known as an immune response, and possible side effects after getting vaccinated are generally the same when given alone or with other vaccines. Learn more about [the timing of other vaccines](#).

If I already had COVID-19 and recovered, am I protected by natural immunity, or do I still need to get a COVID-19 vaccine?

You should get a COVID-19 vaccine even if you already had COVID-19.

Getting sick with COVID-19 offers some protection from future illness with COVID-19, sometimes called "natural immunity." The level of protection people get from having COVID-19 may vary depending on how mild or severe their illness was, the time since their infection, and their age. No currently available test can reliably determine if a person is protected from infection.

All [COVID-19 vaccines currently available](#) in the United States are [effective](#) at preventing COVID-19. Getting a COVID-19 vaccine gives most people a high level of protection against COVID-19 even in people who have already been sick with COVID-19.

[Emerging evidence](#) shows that getting a COVID-19 vaccine after you recover from COVID-19 infection provides added protection to your immune system. [One study](#) showed that, for people who already had COVID-19, those who do not get vaccinated after their recovery are more than 2 times as likely to get COVID-19 again than those who get fully vaccinated after their recovery.

People who were treated for COVID-19 with monoclonal antibodies or convalescent plasma or people who have a history of multisystem inflammatory syndrome in adults or children ([MIS-A](#) or [MIS-C](#)) may [need to wait](#) a while after recovering before they can get vaccinated. Talk to your doctor if you are unsure what treatments you received or if you have more questions about getting a COVID-19 vaccine.

Related pages:

- [Benefits of Getting a COVID-19 Vaccine | CDC](#)
- [Preparing for Your COVID-19 Vaccination | CDC](#)

Can I get vaccinated against COVID-19 while I am currently sick with COVID-19?

No. People with COVID-19 who have symptoms should wait to be vaccinated until they have recovered from their illness and have met the [criteria](#) for discontinuing isolation; those without symptoms should also wait until they [meet the criteria](#) before getting vaccinated. This guidance also applies to people who get COVID-19 before getting their second dose of vaccine.

People who have had a known COVID-19 exposure should not seek vaccination until their quarantine period has ended to avoid potentially exposing healthcare personnel and others during the vaccination visit. This recommendation also applies to people with a known COVID-19 exposure who have received their first dose of an mRNA vaccine but not their second.

Related pages:

- [When to Quarantine](#)
- [Ending Home Isolation](#)

Can I choose which COVID-19 vaccine I get?

Currently, the [Pfizer-BioNTech COVID-19 vaccine](#) is the only one available to children ages 5 years through 17 years. For adults 18 years and older, CDC does not recommend one vaccine over another. All currently authorized and recommended COVID-19 vaccines are [safe](#) and [effective](#). The most important decision is to get a COVID-19 vaccination as soon as possible. Widespread vaccination is a critical tool to help stop the pandemic.

People should be aware that a risk of a rare condition called thrombosis with thrombocytopenia syndrome (TTS) has been reported following vaccination with the J&J/Janssen COVID-19 vaccine. TTS is a serious condition that involves blood clots with low platelet counts. This problem is rare, and most reports were in women between 18 and 49 years old. For women 50 years and older and men of any age, this problem is even more rare. There are other COVID-19 vaccine options available for which this risk has not been seen (Pfizer-BioNTech, Moderna).

Learn more about [your COVID-19 vaccination](#), including how to find a vaccination location, what to expect at your appointment, and more.

Related page:

- [Your Vaccination](#)
- [Safety of COVID-19 Vaccines](#)
- [Ensuring COVID-19 Vaccines Work](#)

After Your Vaccine

How can I get a new COVID-19 vaccination card? 

If you need a new vaccination card, contact the vaccination provider site where you received your vaccine. Your provider should give you a new card with up-to-date information about the vaccinations you have received.

If the location where you received your COVID-19 vaccine is no longer operating, contact your state or local health department's [immunization information system \(IIS\)](#) for assistance.

CDC does **not** maintain vaccination records or determine how vaccination records are used, and CDC does **not** provide the CDC-labeled, white COVID-19 vaccination record card to people. These cards are distributed to vaccination providers by state and local health departments. Please [contact your state or local health department](#) if you have additional questions about vaccination cards or vaccination records.


Related page:

- [Getting Your CDC COVID-19 Vaccination Record Card](#)

Do I need to wear a mask and avoid close contact with others if I am fully vaccinated? 

After you are fully vaccinated for COVID-19, take these steps to protect yourself and others:

- In general, you do not need to wear a mask in outdoor settings.
- If you are in an area with [high numbers of COVID-19 cases](#), consider wearing a mask in crowded outdoor settings and when you are in [close contact](#) with others who are not fully vaccinated.
- If you have a condition or taking medications that weaken your immune system, you may not be fully protected even if you are fully vaccinated. You should continue to take all [precautions recommended for unvaccinated people, including wearing a well-fitted mask](#), until advised otherwise by their healthcare provider.
- If you are fully vaccinated, to maximize protection from the Delta variant and prevent possibly spreading it to others, wear a mask indoors in public if you are in an area of [substantial or high transmission](#).

I was fully vaccinated in another country. How do I transfer my proof of vaccination from that country to get a proof of vaccination card in the United States? 

CDC does **not** keep vaccination records or determine how vaccination records are used. To update your records with vaccines you received while outside of the United States, you may:

- Contact the immunization information system (IIS) in your state. You can find state IIS information on the [CDC website](#).

- Contact your healthcare provider or your local or state immunization program through your [state's health department](#).

The CDC-labeled white COVID-19 Vaccination Record Cards are only issued to people vaccinated in the United States. CDC recommends you keep your documentation of being vaccinated in the other country as proof of vaccination. CDC also recommends checking with your primary care provider or state health department for options to document your vaccination status domestically.

Am I considered fully vaccinated if I was vaccinated in another country?

You are considered [fully vaccinated](#) if you

- Received any single-dose COVID-19 vaccine series that is authorized or approved by the U.S. Food and Drug Administration (FDA) or listed for emergency use by World Health Organization (WHO).
- *Received [any combination](#) of two doses of an FDA approved/authorized or WHO emergency use listed COVID-19 two-dose series with at least 17 days between doses.

**CDC does not recommend mixing different COVID-19 vaccines for the primary series, but CDC is aware that this is increasingly common in many countries outside of the United States. Therefore, for the interpretation of vaccination records, these people are considered fully vaccinated.*

Accepted COVID-19 Vaccines

	Vaccines Approved or Authorized by the U.S. Food and Drug Administration	Vaccines Listed for Emergency Use (EUL) by the World Health Organization
Single dose	<ul style="list-style-type: none"> • Janssen/J&J 	<ul style="list-style-type: none"> • Janssen/J&J
2-dose series	<ul style="list-style-type: none"> • Pfizer-BioNTech • Moderna 	<ul style="list-style-type: none"> • Pfizer-BioNTech • Moderna • AstraZeneca • Covishield • BIBP/Sinopharm • Sinovac • Bharat Biotech (COVAXIN) • Novavax/Covovax


If you received a COVID-19 vaccine that is **not** authorized or approved by FDA or listed for emergency use by WHO, you may start over with an FDA-authorized or approved COVID-19 vaccine. Please note that no data are available on the safety or effectiveness of COVID-19 vaccination after receiving a non-FDA-authorized or approved COVID-19 vaccine. Wait at least 28 days after you received the last dose of the non-FDA-authorized or approved vaccine before receiving an FDA-authorized or approved COVID-19 vaccine.

Visit the [clinical considerations webpage](#) for more information.

Am I eligible to receive a booster shot and/or additional primary dose if I was fully vaccinated in another country?


People who have been fully vaccinated outside the United States with a COVID-19 vaccine that is [FDA-approved or FDA-authorized](#) are eligible to receive an additional primary dose and/or a booster dose according to the same guidance for

[authorized](#) are eligible to receive an additional primary dose and/or a booster dose, according to the same guidance for people who received these vaccines in the United States.

People who have been fully vaccinated with a COVID-19 vaccine that is **not** FDA-approved or FDA-authorized but is listed for emergency use by the World Health Organization (WHO) and people who completed a mixed vaccine series composed of any combination of FDA-approved, FDA-authorized, or [WHO Emergency Use Listed COVID-19 vaccines](#)  are also eligible to receive an additional primary dose (for people with weakened immune systems) and/or a booster dose.

Additional primary dose for those who are moderately or severely immunocompromised

A number of people who are [moderately or severely immunocompromised](#) and who were vaccinated abroad should receive an additional primary dose if they meet the following conditions:

- Moderately or severely immunocompromised **who are ages 12 and older and have been fully vaccinated** should receive an additional primary dose of Pfizer-BioNTech COVID-19 vaccine at least 28 days after receiving the second vaccine dose of their vaccine primary series. Fully vaccinated includes completing a vaccine primary series for:
 - [not FDA-authorized or FDA-approved](#)  vaccine but is listed for emergency use by WHO and people who completed a mix and match series composed of any combination of FDA-approved,
 - FDA-authorized vaccine, or
 - WHO Emergency Use Listed COVID-19 vaccines.

Single-dose booster shots

[Booster shots](#) should be obtained by people who meet the following conditions. Those who have been fully vaccinated with a COVID-19 vaccine that is not FDA-authorized or FDA-approved but is listed for emergency use by WHO and people who completed a mix and match series composed of any combination of FDA-approved, FDA-authorized, or WHO Emergency Use Listed COVID-19 vaccines. Of these people, those who also are:

- 16 years and older receive a single booster dose of Pfizer-BioNTech COVID-19 vaccine at least 6 months after completing their primary series.
- This also includes people ages 16 years and older who are moderately or severely immunocompromised. These people **should receive** a single Pfizer-BioNTech COVID-19 booster shot at least 6 months after completing their additional primary dose.

Visit the [clinical considerations webpage](#) for more information.

Answers to more questions about:

- [Healthcare Professionals and COVID-19 Vaccines](#)
- [Vaccines.gov](#)
- [Vaccine Administration Management System \(VAMS\)](#)
- [V-safe after Vaccination Health Checker](#)

Updated Dec. 21, 2021



**Department of Air Force
Civilian Force Management Directorate**

AF/A1C

22 October 2021

Revision 2 Issued on 14 January 2022

**REFERENCES FOR
DAF CIVILIAN EMPLOYEE MANDATORY
COVID-19 VACCINATION GUIDE**

- (a) **Under Secretary of Defense for Personnel and Readiness Memorandum, "Force Health Protection Guidance (Supplement 23) Revision 3 – Department of Defense Guidance for Coronavirus Disease 2019 Vaccination Attestation and Screening Testing for Unvaccinated Personnel," December 20, 2021**
- (b) Safer Federal Workforce Task Force, "COVID-19 Workplace Safety: Agency Model Safety Principles," September 13, 2021
- (c) Executive Order 14043, "Requiring Coronavirus Disease 2019 Vaccination for Federal Employees," September 9, 2021
- (d) Deputy Secretary of Defense Memorandum, Mandatory Coronavirus Disease 2019 Vaccination of DoD Civilian Employees, October 1, 2021
- (e) Secretary of Defense Memorandum, "Mandatory Coronavirus Disease 2019 Vaccination of Department of Defense Service Members," August 24, 2021
- (f) United States Office of Personnel Management Memorandum, "Guidance on Applying Coronavirus Disease 2019 Vaccination Requirements to New Hires – Executive Order 14043," October 1, 2021
- (g) United States Office of Personnel Management Memorandum, "Guidance on Enforcing Coronavirus Disease 2019 Vaccination Requirement for Federal Employees – Executive Order 14043," October 1, 2021
- (h) Department of Defense Directive 5100.03, "Support of the Headquarters of Combatant and Subordinate Unified Command", February 9, 2011, Incorporating Change 1, September 7, 2017
- (i) Safer Federal Workforce Task Force, "COVID-19 Workplace Safety: Guidance for Federal Contractors and Subcontractors," September 24, 2021
- (j) Principal Director for Defense Pricing and Contracting Memorandum, "Class Deviation 2021-00009—Ensuring Adequate COVID-19 Safety Protocols for Federal Contractors, October 1, 2021
- (k) Executive Order 14042, "Ensuring Adequate COVID Safety Protocols for Federal Contractors," September 9, 2021
- (l) Acting Under Secretary of Defense for Personnel and Readiness Memorandum, "Force Health Protection Guidance (Supplement 18) – Department of Defense Guidance for Protecting All Personnel in Department of Defense Workplaces During the Coronavirus Disease 2019 Pandemic," March 17, 2021

Appendix

- (m) Under Secretary of Defense for Personnel and Readiness Memorandum, "Force Health Protection Guidance (Supplement 15) Revision 2 – Department of Defense Guidance for Coronavirus Disease 2019 Laboratory Testing Services," July 2, 2021
- (n) Department of Defense (DoD) Instruction 5400.11, "DoD Privacy and Civil Liberties Programs," January 29, 2019 (as amended)
- (o) Office of the Under Secretary of Defense (Comptroller)/Chief Financial Officer of the Department of Defense, "DoD Response to the Novel Coronavirus – Cost Reporting Guidance," April 13, 2020
- (p) Under Secretary of Defense for Personnel and Readiness Memorandum, "Force Health Protection Guidance (Supplement 23) Revision 2 - Department of Defense Guidance for Coronavirus Disease 2019 Vaccination Attestation, Screening Testing, and Vaccination Verification," October 29, 2021 (hereby rescinded)
- (q) Secretary of the Air Force Memorandum, "Mandatory Coronavirus Disease 2019 Vaccination of Department of the Air Force Civilian Employees," October 8, 2021
- (r) Defense Civilian Personnel Advisory Service Message 2021100, "Coverage for Injuries Resulting from the COVID-19 Vaccination Mandate for Federal Employees, October 14, 2021
- (s) Deputy Secretary of Defense Memorandum, "Updated Coronavirus Disease 2019 Guidance Related to Travel and Meetings", September 24, 2021
- (t) Secretary of the Air Force Memorandum, "Delegation of Authority for Deciding Exemptions for Mandatory Coronavirus Disease 2019 Vaccination of Department of the Air Force Civilian Employees," November 3, 2021