Submit this form through OASIS if you wish to request an exemption consistent with the stipulations outlined in Medical Student Handbook [Policy 524.00 Site Assignments: Clerkship Level](https://med.uvm.edu/studenthandbook/52400).

**Site Exemption Request Deadlines, no later than noon on:**

* **August 1:** Student Accessibility Services (SAS) documentation request, if applicable
* **September 1:** OASIS request (accompanied by SAS accommodation letter, if applicable)

**IMPORTANT:** Documentation to support a medical request should not include any medical information. When working with SAS, medical [information should be submitted directly to SAS](http://med.uvm.edu/docs/lcom_sas_siteexemptionform/medical-education-documents/student-affairs/lcom_sas_siteexemptionform.pdf), and only the SAS accommodation letter should be uploaded to OASIS with this form.

Check the box next to the applicable ground(s) then upload this form and any relevant **non-medical** supporting documentation, including applicable SAS accommodation letter, to your “Exemptions” academic history tab in OASIS [“Exemption Request (Student Upload)” section]. OASIS will notify you when the Office of Medical Education has uploaded your exemption request decision.

Requests received after the annual deadline will not be considered except in the case of emergent personal or medical issues and **are subject to capacity limitations**. In such cases, students have the option to request a temporary re-assignment to UVM Medical Center for an upcoming clerkship. To request a temporary exemption students will also need to complete and submit this form via OASIS.

**Name:**  Click here to enter text. **Date Uploaded to OASIS:** Click here to enter a date.

**Type of exemption requested:**

[ ]  Clerkship Year—all rotations within one hour driving distance from Burlington.

[ ]  Temporary—specific rotation within one hour driving distance from Burlington, specify rotation: Click here to enter text.

**Check Applicable Grounds:**

 [ ]  I have children under age 18 living in my household.

 [ ]  I have a significant medical condition/disability that requires ongoing treatment locally or limits my ability to travel. (SAS accommodation letter required. Please note that [completed documentation](http://med.uvm.edu/docs/lcom_sas_siteexemptionform/medical-education-documents/student-affairs/lcom_sas_siteexemptionform.pdf) may take four weeks for review.)

 [ ]  I have a family member with a significant medical condition for whom I provide care locally.

**Alternative/Individualized Distance Request:** Click here to enter text.

Note that the default for local placement is within a one hour driving distance of Burlington. If you need to be placed within a different driving distance from the Burlington area provide alternative distance requirements and the clinical clerkship team will strive to reasonably accommodate your individualized request. If based on medical/ADA grounds, the SAS accommodation letter must stipulate support for the alternative distance request.

**Decision:**

[ ]  Approved

[ ]  Denied

**Electronic Signature, Associate Dean for Students:** Click here to enter text.

**Decision Date:** Click here to enter a date.

**Review Notes** (*for office use only*): Click here to enter text.