



ver. August 16, 2021

**COVID-19 Protocol Verification
for Osher Lifelong Learning Institute (“OLLI”)
Participants**

As of August 2, 2021, per CSU and CSUMB policy, all university and auxiliary faculty, staff and students must be vaccinated, or have an approved vaccination exemption (religious or medical), to participate on campus, with status reported by each person to the campus. Anyone with an approved vaccination exemption must get tested weekly for COVID-19.

CSUMB is also performing additional measures at all CSUMB facilities to protect public health:

- Clean high touch areas daily
- Have hand sanitizer in publicly accessible areas
- Provide soap for hand washing in each restroom
- Provide personal protective equipment to employees upon request

As the Participant in an OLLI class being held at a CSUMB campus facility, including off-campus facilities, the Participant acknowledges that they:

- a. Understand that CSUMB requires its employees and students to be fully vaccinated before participating on campus and to report such status to CSUMB, or that the CSUMB employee or student have an approved vaccination exemption from CSUMB, but will get tested weekly for COVID-19;
- b. Will comply with the then-current CSU and CSUMB safety procedures and policies for all on-campus participants, including:
 - i. Wear a mask indoors (or as otherwise posted as required at campus facilities),
 - ii. Wash hands frequently or use hand sanitizer,
 - iii. Cover mouth and nose when coughing or sneezing,
 - iv. Avoid unnecessary physical contact;
 - v. Access only the designated areas that are open for the participants at the campus facility;
- c. Self-provide and/or ask the OLLI class leader for appropriate and necessary personal protective equipment;
- d. Not enter any CSUMB facilities, including off campus facilities, if the Participant currently has [COVID-19 related symptoms](#); and
- e. Immediately report to the OLLI director mcrompton@csumb.edu if the Participant tests positive for COVID-19, and
- f. Agree that participation in this OLLI class is voluntary and that Participant assumes all risks of participation.

Acknowledged:

Participant Printed Name _____

Participant Signature _____ **Date** _____

Name of class _____