



DEPARTMENT OF DEFENSE  
NATIONAL DEFENSE UNIVERSITY  
WASHINGTON DC 20319-5066

15 October 2021


MEMORANDUM FOR NATIONAL DEFENSE UNIVERSITY, FACULTY, STAFF,  
STUDENTS, AND CONTRACT PERSONNEL

SUBJECT: Implementing Guidance on Enforcement of Coronavirus Disease 2019 Vaccination Requirement for Federal Employees – Executive Order 14043

References: (a) OSD Force Health Protection Guidance (Supplement 23) DoD Guidance for Coronavirus Disease 2019 Vaccination Attestation and Screening for Unvaccinated Personnel, 7 September 2021  
(b) OPM Guidance on Enforcement of Vaccination of Coronavirus Disease 2019 Vaccination Requirement for Federal Employees, 1 October 2021  
(c) OSD Mandatory Coronavirus Disease 2019 Vaccination of DoD Civilian Employees, 1 October 2021  
(d) OPM Guidance on Enforcing Coronavirus 2019 Vaccination Requirement for Federal Employees - Executive Order 14043 memo  
(e) NDU-Return to Campus Base Plan, 10 August 2021

1. Purpose: This memorandum establishes implementing procedures for enforcement of Coronavirus 2019 vaccination requirements at NDU.
2. This memorandum is effective immediately. It will be updated or revised as guidance is updated by the Office of Personnel Management (OPM) and the Department of Defense.
3. Applicability. This guidance applies to the NDU workforce including federal civilian employees, military personnel, MOA/MOU-detailed personnel, International Fellows, and contractors.
4. Vaccination Deadline. Deadlines for vaccination completion are fast approaching. Thank you to the 94% of our workforce who have chosen to protect themselves and their colleagues by getting vaccinated. For our remaining unvaccinated personnel who have not received, nor are actively pursuing a vaccination exemption, you may face administrative or disciplinary action up to and including removal from government service for civilian personnel, or return-to-service or return-to-agency for military and interagency personnel if you are not fully vaccinated by the required dates:
  - a. Civilian personnel: must receive the second dose of Pfizer/Moderna or single dose of Johnson & Johnson NLT 8 Nov 2021 to meet the required 22 Nov 2021 fully vaccinated date. If using Pfizer, you must receive your first dose by 18 Oct 2021.
  - b. US Coast Guard: must receive the second dose of Pfizer/Moderna or single dose of Johnson & Johnson NLT 08 Nov 2021 to meet the required 22 Nov 2021 fully vaccinated date. If using Pfizer, must receive first dose no later than 18 Oct 2021.
  - c. AF/Space Force: must receive the second dose of Pfizer/Moderna or single dose of Johnson & Johnson by 18 Oct 2021 to meet required 2 Nov 2021 fully vaccinated date. If using Pfizer, you must have received your first dose by 21 Sep 2021.

- d. Army: must receive the second dose of Pfizer/Moderna or single dose of Johnson & Johnson by 2 Dec 2021 to meet required 15 Dec 2021 fully vaccinated date. If using Pfizer, you must receive your first dose by 4 Nov 2021
- e. Navy/Marine Corps: must receive the second dose of Pfizer/Moderna or single dose of Johnson & Johnson by 14 Nov 2021 to meet required 28 Nov 2021 fully vaccinated date. If using Pfizer, you must receive your first dose by 18 Oct 2021.
5. Vaccination Attestation. IAW reference (a), all NDU civilian employees and contractors who are fully vaccinated (14 days after complete vaccine regimen) will attest to their vaccination status NLT 9 November 2021, online at <https://milconnect.dmdc.osd.mil>; see Reference (a) and Attachment (1). DD Form 3150 (attached) may be submitted hard copy if milconnect access is not available. Copies of DD Form 3150 will be collected by Components and Directorates and maintained by Health and Fitness (H&F). Component Heads and Directors will report attestation completion for all personnel to H&F NLT 16 November 2021. Newly hired or onboarding personnel will ensure their Components or Directorates are provided DD Form 3150 for their attestation status. Uniformed Service members and Agency personnel will follow the vaccine attestation process established by their home Service or Agency and will ensure H&F are informed.
6. Vaccination Exemption Process. Military personnel will follow their Service exemption request procedures with notification through their Service Chair. For civilian personnel, we expect to receive detailed guidance and instructions soon for those seeking medical or religious exemptions from receiving the Coronavirus 2019 vaccine. Components and Directorates will track those personnel seeking exemptions and will provide weekly updates to H&F. Uniformed Service members and Agency personnel will comply with their home Service or Agency exemption counseling guidance and exemption procedures.
7. Mandatory Testing. All unvaccinated employees, to include Uniformed Service members and Agency personnel with a formally approved exemption from the vaccination will adhere to a weekly testing regime, details to be published soon. For contractors, the employer is responsible for ensuring vaccine compliance, exemptions, and testing.
8. Non-Vaccinated Personnel. NDU Health & Fitness will maintain a roster of non-vaccinated personnel. All personnel will review references, and civilian unvaccinated personnel will specifically review reference (b), the OPM FAQ outlining employment ramifications if not vaccinated by the established deadline.
9. Proposing and Deciding Official. The Chief Human Capital Officer will serve as the Proposing Official for the NDU Vaccination Enforcement process for any civilian personnel administrative or disciplinary actions. The Chief Operating Officer will serve as the Deciding Official.
10. Point of Contact. POC for this guidance is the NDU Chief Human Capital Officer.

  
MICHAEL T. FLEHN, Lt Gen, USAF  
President, National Defense University

Attachment: DD Form 3150

# ATTACHMENT 2

## DD Form 3150 - "Certification of Vaccination"

CUI (when filled In)

<b>CERTIFICATION OF VACCINATION</b>		OMB No. 0704-0613 Expiration: 20220226
<b>AGENCY DISCLOSURE NOTICE</b>		
<p>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 and maintaining the data needed, and completing and reviewing the collection of 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, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Project Director (0704-0187), Washington, DC 20503.</p>		
<b>PRIVACY ACT STATEMENT</b>		
<p><b>Authority:</b> 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, Occupational Safety and Health Program for Federal Employees; as well as 10 U.S.C. 113, 10 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</p> <p><b>Principal Purpose:</b> This information is being collected and maintained to implement Coronavirus Disease 2019 (COVID-19) workplace safety plans, including DoD's COVID-19 testing programs, and to ensure the safety and protection of the DoD workforce, workplace, and other DoD facilities and environments, consistent with the above-referenced authorities, the COVID-19 Workplace Safety Agency Model Safety Principles established by the Senior Federal Workforce Task Force, and guidance from the Centers for Disease Control and Prevention and the Occupational Safety and Health Administration</p> <p><b>Routine Use(s):</b> 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 externally, for example, to disclose information to: a person, organization, or governmental entity as 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 disease or other laws concerning health and safety in the workplace environment; adjudicative bodies (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, experts, consultants, students, and others as necessary to perform their duties for the Federal 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 to act on your behalf. A complete list of routine uses may be found in the applicable 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, <a href="#">75 Fed Reg 35099 (Jun 21, 2010)</a> amended SA.fAd...B.e.g.L. 4815 (3D. 21lm For Federal employees not covered by OPM/GOVT-10, contractor personnel, and other DoD-affiliated persons: DPR 39 DoD, DoD Personnel Accountability and Assessment System of Records, <a href="#">85 Fed. Reg. 17047 (Mar. 26, 2020)</a> (also available at <a href="https://dpcld.defense.gov/Portals/49/Documents/Privacy/SORNs/OSDJS/DPR-39-DoD.pdf">https://dpcld.defense.gov/Portals/49/Documents/Privacy/SORNs/OSDJS/DPR-39-DoD.pdf</a>).</p> <p><b>Consequences of Failure to Provide Information:</b> Providing this information is voluntary. However, if you fail to provide this information, you will be treated as not fully vaccinated for purposes of implementing safety measures, including with respect to mask-wearing, physical distancing, testing, travel, quarantine, and restrictions on access to DoD facilities and environments. Failure to provide such information may also hinder DoD's ability to implement COVID-19 workplace safety plans, thereby increasing the health or safety risk to DoD-affiliated personnel and DoD facilities</p>		
<p><b>INSTRUCTIONS:</b> This form should be completed by civilian employees, onsite contractor employees, and other individuals if required in accordance with current DoD Force Health Protection Guidance Service members should not complete this form</p>		
1. NAME (Last, First, MI):	2. DoD ID NUMBER:	
<p><b>3. PLEASE CHECK THE BOX BELOW THAT COINCIDES WITH YOUR COVID-19 VACCINATION STATUS:</b></p> <p><input type="checkbox"/> 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 of a one-dose vaccine (e.g., Johnson &amp; Johnson/Janssen).</p> <p><input type="checkbox"/> 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 final dose of any vaccine less than <b>two weeks</b> ago.</p> <p><input type="checkbox"/> I have not been vaccinated</p> <p><input type="checkbox"/> I decline to respond</p> <p>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, please check either "I have not been vaccinated" or "I decline to respond." Note that if you have already received one dose of a vaccine, but are not yet fully vaccinated, or if you received your final dose less than two weeks ago, then you will be treated as not fully vaccinated until you are at least two weeks past your final dose and resubmit your vaccination information.</p> <p><input checked="" type="radio"/> I attest that the information provided in this form is accurate and true to the best of my knowledge</p> <p>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. I understand that making a false statement on this form could result in additional administrative action including an adverse personnel action up to and including removal from my position.</p>		
4. DATE (YYYYMMDD)	5. SIGNATURE (Full Name)	

DD FORM 3150, SEP 2021

CUI (when filled In)

Controlled by: OUSD(P&R)  
Controlled by: ASD(HA)  
CUI category: HLTH: PRVY: OPSEC  
LDC: DL(DoD Only)  
POC: osd.pentagon.ousd-p-r.mbx.fonns@mail.mil

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