

**Religious Exemption Form** Student Name \_\_\_\_\_

Children with religious exemptions shall be permitted to attend school except in the case of vaccine-preventable disease outbreak in the school. All susceptible students will be excluded from school based on public health officials' determination that the school is a primary site for disease exposure, transmission and spread into the community. Students excluded from school for this reason will not be able to return to school until (1) the danger of the outbreak has passed as determined by public health officials, (2) the student becomes ill with the disease and completely recovers, or (3) the student is immunized. For example, for measles the complete incubation period is 18 days from the onset of symptoms for the last case in the community. Outbreaks like measles may last for several months.

No child may be admitted to school without proof of immunization or a statement of exemption. Parents or guardians seeking an exemption on the basis that immunization would be contrary to religious beliefs of the child should complete the following statement and return it to the school nurse.

To Whom It May Concern:

As the parent(s)/guardian(s) of \_\_\_\_\_,  
(Name of Student)

I/we hereby assert that the immunization of this student would be contrary to our religious beliefs. Therefore, this child shall be exempt from the required immunizations and shall be permitted to attend school except in the case of a vaccine-preventable disease outbreak in the school.

\_\_\_\_\_/\_\_\_\_\_  
Signature of Parent(s)Guardian(s)                      Date

\_\_\_\_\_/\_\_\_\_\_  
Signature of Parent(s)Guardian(s)                      Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                                      State                                      Zip