108 Ravine Parkway, Oneonta, NY 13820

Phone: (607) 436-3573 Fax: (607) 436-2074

SUNY Oneonta Student Health Center MMR Religious Exemption Form

Section I: Student Information

Last Name	First Name	Student Email	Date of Birth	Student / A #

Section II: Religious Beliefs Exemption Request

(to be completed by student or guardian, only if student is under 18 years old)

Requests for exemption based on religious beliefs: Students who hold genuine and sincere religious beliefs contrary to the practice of immunization may be exempt after submitting a written statement. The statement must include an explanation of how receiving the immunization conflicts with the student's sincere religious belief or practice.

Student statement:		
-		
understand that I am not fully vac be excluded from class or camp		Mumps, and Rubella (MMR). If there is an outbreak on campe has passed.
Signature:		Date:
Student or guardian, only if under 18	years old	