



EAST TENNESSEE STATE UNIVERSITY
STUDENT HEALTH SERVICE

Box 70675 ~ Johnson City, TN 37614 ~ Phone: (423) 439-4225 ~ Fax: (423) 439-4560

REQUEST FOR AN EXEMPTION FROM IMMUNIZATION REQUIREMENT:
RELIGIOUS REASONS

I understand that East Tennessee State University in accordance with Tennessee Code concerning Immunization Against Certain Diseases Prior to School attendance requires proof of immunization with two doses of Measles, Mumps and Rubella vaccines, administered on or after the first birthday.

I request, in accordance with State, TBR and ETSU policy, an exemption from this requirement on the grounds that such immunization conflicts with my religious beliefs and practices which I affirm under the penalty of perjury.

THIS FORM MUST BE SIGNED BEFORE A NOTARY.

Signature _____ Name _____
(please print)

Date _____ Student ID# _____

Parent or guardian signature _____
(Signature of parent or guardian required **only** if student under 18 years of age)

Sworn and subscribed before me this _____ of _____ 20_____.

Notary signature _____

Commission expires _____

NOTARY SEAL:

