

APPENDIX E – UTAH IMMUNIZATION PROGRAM SAMPLE FORMS



Personal Exemption Form

The Utah Department of Health strongly supports immunization as one of the easiest and most effective tools in preventing serious communicable diseases. These diseases, which are preventable by vaccination, can cause serious illness and even death. The Utah Department of Health believes the benefits of immunization outweigh the risk of adverse events which may be associated with the vaccines. The Utah Department of Health also recognizes that individuals have the right to make the decision, should they choose not to immunize.

As the parent/guardian of _____, I certify that I have strong personal beliefs against the practice of immunization/vaccination. I am opposed to having my child immunized against one or all vaccine-preventable diseases.

I also understand that if an outbreak of any vaccine-preventable disease occurs for which this child is exempted, the child for whom this exemption is claimed is to be excluded from the school or early childhood program for the duration of the outbreak and/or threat of exposure. My child will be allowed back only when a health department representative is satisfied that there is no longer a risk of contracting or transmitting a vaccine-preventable disease.

I hereby request that my child be exempted from the Utah Immunization Rule for Students (R396-100) due to my personal opposition to immunizations.

- This personal exemption is for all immunizations.
- This personal exemption is for one immunization. (List immunizations included in this exemption)

Name of Parent/Guardian (PRINT)

Signature of Parent/Guardian

Street Address

City

County

Zip Code

Date

Name of Child Exempted (PRINT)

Child's Date of Birth

Witness (Local Health Officer or Designee)

Title

Date

Name of School or Early Childhood Program

* Exemption forms can only be used for enrollment in early childhood programs or public, private, and parochial schools for grades kindergarten through twelve. Exemptions and exemption forms do not apply to college/university attendance.

WHITE – School or Early Childhood Program

Utah Department of Health
Immunization Program 05/11