Student Request For Exemption From Union College Immunization Policy - COVID-19

Purpose: To provide documentation for a student's exemption of the required immunization; to identify students who are vulnerable to vaccine-preventable illness in the event of an outbreak; to inform these students of the potential effect on their presence on campus in the event of an outbreak.

Procedure: Students who wish to exempt themselves from receiving the required vaccination must complete this documentation, have it notarized, and provide it to the appropriate College official.

Religious Exemptions:

☐ Completed Request for Exemption (this document).

☐ Student Personal Statement. The student must provide a written and signed statement (Union College does not accept letters or signatures from parent or legal guardians unless the student is or will be under 18 years of age at the time of enrollment) detailing the religious basis for the objection and explain:

— Why the student is requesting this religious exemption;

— The religious principles that guide the student’s objections to immunization;

— Whether the student is opposed to all immunizations, and, if not, the religious basis that prohibits vaccinations.

☐ Religious Organization Form. The student must obtain and submit a document from their religious organization supporting the basis of their faith / beliefs which are contrary to the practice of immunization or use of vaccines. The document should include a signature from their religious leader, the name, address, and phone number / email address of the religious organization.

Medical Exemptions:

☐ Completed Request for Exemption (this document).

☐ A written certificate from a licensed physician or nurse practitioner that one or more of the required immunizations is medically contraindicated or otherwise detrimental to the student’s health directed to the Union College Health Services - Wicker Wellness Center.

☐ The specific vaccine must be indicated. The duration of the exemption must be specified and the reason for the medical exemption must be valid.

The Union College Health Services office will carefully review medical exemption requests. A Committee designated by the Vice President for Student Affairs will carefully review religious
exemption requests and make recommendations to the Vice President for Student Affairs. Approval is not guaranteed. After the student’s request has been reviewed and processed (please allow 14 days), the student will be notified, in writing, if an exemption has been granted or denied. The decisions of the Health Services office and the Vice President for Student Affairs are final and not subject to appeal.

**NOTICE:** Students with an approved exemption may be required to comply with COVID-19 testing and other preventive requirements as specified in the exemption approval and as may be updated by later notification and / or posting of requirements on the Union College website.

I do not wish to receive these vaccinations for the following reasons:

- [ ] Religious (letter attached)
- [ ] Medical (medical documentation attached)

I agree to hold Union College harmless in the event of any illness or injury resulting from my noncompliance with this requirement. I understand that in the case of a vaccine-preventable disease outbreak to which I am likely not immune, at the discretion of the Health Services professional staff and under the guidance of the New York State Department of Health, I may be temporarily excluded from classes, residence halls or the entire College campus. This action would be taken not only to protect my health, but to reduce the risk to the community of further spread of the illness through me. I will be responsible for any expenses I may incur for such exclusion. I also understand that the make-up of any missed class work is at the discretion of the involved faculty.

Name [print]: _____________________________________  DOB: _______________________
Signature: ______________________________________ Date: _______________________

Parent or legal guardian, if student is a minor, must sign.
Name [print]: _____________________________________  Date: _______________________
Signature: ______________________________________

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*Dated July 1, 2021*