

## Elim Bible Institute and College Immunizations Religious Exemption

**Student Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Name of Parent/Guardian (if under 18):** \_\_\_\_\_

This form is for your use in applying for a religious exemption to Public Health Law immunization requirements. Its purpose is to establish the religious basis for your request since New York State permits exemptions on the basis of a sincere religious belief. Philosophical, political, scientific, or sociological objections to immunization do not justify an exemption under the New York State Department of Health regulations.

The New York State Department of Health regulations require a written and signed statement that expresses your objection to your immunizations due to sincere and genuine religious beliefs which prohibit your immunizations.

In the area provided below, please write your statement. The statement **must** address **all** of the following elements:

- Explain in your own words why you are requesting this religious exemption.
- Describe the religious principles that guide your objection to immunization.
- Indicate whether you are opposed to all immunizations, and if not, the religious basis that prohibits particular immunizations.

You may attach additional written pages or other supporting materials to this form if you so choose.

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I hereby affirm the truthfulness of the foregoing statement and have received and reviewed the informational immunization materials provided to me by Elim Bible Institute and College.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent/Guardian (if under 18):** \_\_\_\_\_