



THE UNIVERSITY
of NORTH CAROLINA
at CHAPEL HILL

DIVISION OF STUDENT AFFAIRS

CAMPUS HEALTH SERVICES
JAMES A. TAYLOR BUILDING
CAMPUS BOX 7470
CHAPEL HILL, NC 27599-7470

<http://campushealth.unc.edu>

REQUEST FOR EXEMPTION FROM IMMUNIZATION REQUIREMENT: RELIGIOUS REASONS

I understand that The University of North Carolina at Chapel Hill in accordance with North Carolina State Law concerning Submission of an Immunization Certificate to a College or University requires each student to submit a certificate of immunization or a record of immunization indicating that the student has received immunizations required by G.S. 130A-152.

I request an exemption from this requirement on the grounds that such immunization(s) conflict(s) with my religious beliefs and practices.

Signature of Student

Date

Printed Name of Student

PID #

Signature of parent or Guardian (if under 18 years of age)

Date