

Hofstra University

Request and Certification – Religious Exemption from Immunization Requirement

Name:

Pride Email:

Hofstra ID:

Phone:

Please indicate which immunization(s) you are requesting an exemption from

<input type="checkbox"/>	Measles/Mumps/Rubella	<input type="checkbox"/>	All Live Vaccines
<input type="checkbox"/>	Other:		

Hofstra University policy requires all students attending in-person courses and/or utilizing campus resources to have certain immunizations on file. A student may be exempted from the University's vaccination requirement if, in the opinion of the University, that student holds genuine and sincere religious beliefs which are contrary to the practice of immunization.

Objections based on personal beliefs, sociological grounds, morals or philosophy fall outside the scope of religious exemption.

Instructions

For consideration of a religious exemption, students must provide all of the following:

1. **A statement signed and written by the student:**
 - **Stating that the student holds religious beliefs contrary to immunization;**
 - **Demonstrating that the student's religious beliefs are genuinely and sincerely contrary to immunization; and**
 - **Detailing the religious principles that form the basis of the objection to immunization.**
2. **A document from the religious organization to which the student belongs supporting the basis of the religious beliefs which are contrary to immunization, which must be signed by a religious leader of the religion, and which must include the name, address, and phone number/email of the religious leader.**

Hofstra University will not accept or consider letters or signatures from parents or legal guardians for religious exemption requests, unless student is under 18 years of age. In such a case, both the student and parent/guardian must review and sign the applicable documentation and this form as indicated below.

The University reserves the right at any time up until a decision has been made to request additional supporting documentation.

Please complete this entire form, attach the required documents listed above, sign and certify as indicated below and email to ExemptionRequest@Hofstra.edu.

Requests for exemption are subject to University review; exemptions are not granted upon submission. Changes to any of the statements below will not be accepted. You will be notified in writing to your University email address if the exemption has been granted or denied. Appeals will not be considered. If approved, the exemption will remain in effect for the duration of the current academic year.

By signing and submitting this form, you are:

- Requesting exemption from the University's immunization requirement due to your genuine and sincere religious beliefs objecting to immunization;
- Acknowledging your understanding of the risks of non-vaccination and that you have been informed of the value of immunization, knowingly and voluntarily decline to have such immunization;
- Accepting full responsibility for your health, and holding Hofstra University harmless with respect to your requested exemption from the required immunization;
- Acknowledging and agreeing that if exempted you may be subject to additional preventive measures such as screening, testing, social distancing, quarantining, isolation, mask wearing and other health and safety protocols by virtue of your unvaccinated status that may not apply to vaccinated students and that this treatment is based solely on your unvaccinated status;
- Acknowledging and agreeing that if exempted, then solely due to your unvaccinated status, you may be excluded from certain campus activities/residence halls, and that any such exclusion does not entitle you to any reduction in tuition or other associated charges or University fees;
- Acknowledging and agreeing to comply with any such restrictions;
- Acknowledging your understanding that any such action is to protect your health and the health of the University community; and
- Certifying that the information and supplemental documents that you have submitted in connection with this Exemption Request are accurate and complete.

Student

Printed Name:

Signature:

Date:

If student is under 18, parent or guardian must also sign below:

Parent/Guardian's Printed Name:

Signature:

Date:

Parent/Guardian's Phone:

Parent/Guardian's Email: