



Where leaders are made

Student Health Center

Frisch 001 | phone 716-888-2610 | fax 716-888-3217|

**REQUEST FOR RELIGIOUS EXEMPTION TO IMMUNIZATION FORM
PARENT /GUARDIAN STATEMENT (FOR MINORS UNDER 18 YEARS)**

Name of Student _____

Student ID Number _____

Name of Parent(s) /Guardian(s) _____

This form is to be used in applying for a religious exemption to New York State Public Health Law 2165 immunization requirement for measles, mumps and rubella immunizations for your child. Its purpose is to establish the religious basis for your request since New York State permits religious exemptions for students attending a post-secondary institution on the basis of a sincere religious belief. Philosophical, political, scientific, or sociological objections to immunization do not justify as an exemption under New York Department of Health regulation. Canisius College reserves the right to request additional supporting documentation..

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 for your child
- Describe the religious principles that guide your objection to immunization for your child
- Indicate whether you are opposed to all immunizations, and if not, the religious basis that prohibits particular immunizations for your child

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