

Franklin Pierce University Health Services 40 University Drive Rindge, NH 03461 Ofc. (603) 899-4130 FAX (603) 899-1050

Student Vaccine Exemption

Created: 6/2023

Name of Student (please print)	Date of Birth	ID#
		Indicate semester on Rindge campus:
City State		Fall Spring Indicate Grad campus you are attending: Lebanon Manchester Goodyear Ring
l,am		
Franklin Pierce University and request exemption from the re-	quirement to receive th	e following vaccinations:
[] <u>M.M.R.</u> [] <u>Tdap</u> [] <u>Varicella</u> [] <u>Meningitis</u> []	COVID Immunizations (firs	ttwo) [] Other:
Medical Exemption: The physical condition of the aformula in the interest of the interest	prementioned person is	such that immunization would
endanger life or health or is medically contraindicated	·	
Signature		Date
SignaturePhysician/APRN/PA		
Dhaga Niveshar/Address		
Phone Number/Address: • Religious Exemption: Parent or guardian of the afore		ne person himself/herself is an
adherent to a religious belief opposed to immunization	ons.	•
Signature		Data
SignatureParent/Guardian/Emancipated Student or Student	18 and older	Date
Phone Number/Address:		
Personal Exemption: Parent or guardian of the aforeity	mentioned person or th	e person himself/herself is an
adherent to a personal belief opposed to immunizati	•	
Signature		Data
Parent/Guardian/Emancipated Student or Student	18 and older	Date
Phone Number/Address:		
► I understand and agree that in the event of an outbreak of a com	nmunicable disease, I will	(at my own expense) either leave
campus or receive an immunization for the communicable disease as well as the recommendations of the board of public health relate		, ,
·		
▶ I further understand and agree that when one or more cases of a disease are present on campus or in Franklin Pierce University's ged		
off campus.		
Ctudent Nema (-lassa mint)		Date of Birth (marsh/day/are)
Student Name (please print)		Date of Birth (month/day/year)
Student Signature		Date
Student Signature		Date
Parent/Guardian Signature (If student is younger than 18)		 Date