

Student Health & Wellness Center Religious Immunization Exemption

Student Information:		
Last/Family/Surname	First Name	Date of Birth (mm/dd/yyyy)
IIT Student ID# (CWID)	E-mail Address	Phone Number

Section 694.210 Religious Exemption Information

<http://www.ilga.gov/commission/jcar/admincode/077/077006940C02100R.html>

A student may be exempted from the immunization requirements specified in this part upon acceptance by the designated record keeping office of a written and signed statement by the student (or the student's parent or guardian, if the student is under age 18) detailing the student's objection to immunization on religious grounds. The objection must set forth the specific religious belief that conflicts with the immunization. The religious objection may be personal and need not be directed by the tenets of an established religious organization. General philosophical or moral reluctance to allow immunizations will not provide a sufficient basis for an exception to statutory requirements.

Please describe your objection below (attach another piece of paper if necessary):

I hereby request the medical exemption to the Immunization Requirements. I verify that all documentation presented is current and accurate. I also understand that I am subject to the repercussions of falsifying information outlined in the Illinois Institute of Technology Code of Academic Honesty. I further hereby assume each and every risk of non-immunization, and I release Illinois Institute of Technology and all of its officers, directors, employees, and agents from, and agree never to assert a claim against them for, any liability resulting from or in any way related to my decision not to be immunized.

Student Signature: _____ Date (mm/dd/yy): _____

To submit immunization records:
IIT Student Health & Wellness Center
IIT Tower, 3rd Floor
10 W 35th St
Chicago, IL 60609
Fax: 312-567-5702
Email: student.health@iit.edu

For more information please visit our website at <http://www.iit.edu/shwc/>