COVID 19 Vaccine Religious Exemption Form

Section I: Student Information
(to be completed by student or guardian, only if student is under 18 years old upon entry to campus)

Last Name	First Name	Student Email	Date of Birth	Fredonia ID #

Section II: Religious Beliefs Exemption Request
(to be completed by student or guardian, only if student is under 18 years old upon entry to campus)

Requests for exemption based on religious beliefs: Students who hold genuine and sincere religious beliefs contrary to the COVID-19 vaccination may be exempt after submitting a written statement which includes an explanation of how receiving the COVID-19 vaccination conflicts with the student's sincere religious belief or practice, and (2) certify how not receiving the COVID-19 vaccination will not otherwise prevent the students' completion of the programmatic or curricular requirement of their academic program.

Student statement:

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☐ I certify that I have confirmed with my academic program that not receiving the COVID-19 vaccination will not prevent my completion of the programmatic or curricular requirements.

☐ I understand that if I am not fully vaccinated against COVID-19, I will need to abide by all COVID-19 related health and safety restrictions if accessing a SUNY facility, including, but not limited to, use of face masks, social distancing, participation in surveillance testing, and quarantine.

Signature: _____ Date: _____

Student or guardian, only if under 18 years old upon entry to campus

Once completed, students email this form to the Student Health Center at health.center@fredonia.edu. Uploaded exemption request forms will be reviewed. Decisions will be released through the Secure Messaging function of the Health Services' portal.