CHARLOTTE CAMPUS
Health Services
Academic Center, 2nd Floor

JWU Charlotte Religious Exemption Statement

If the bona fide religious beliefs of a student (or the parent or guardian of a student, if the student is under age 18) are contrary to the immunization requirements of North Carolina law, the student may request exemption from the requirement of N.C.G.S. 130A-152 et seq., by submitting a completed copy of this form.

I, _____, am requesting a religious exemption from vaccination against the diseases(s) or condition(s) marked below, under N.C.G.S. 130A-157. I understand that this exemption is allowed solely for sincerely held religious beliefs and not for political, social, or other personal beliefs. I affirm that the information I am submitting to substantiate my request is true.

I hereby request a religious exemption to be vaccinated against the disease(s) or condition(s) marked below:

_MMR   _Varicella (chickenpox)
_Adult Tdap   _Meningitis
_Hepatitis B   _All vaccines
_Polio

Please provide a personal written statement describing your sincerely held religious beliefs that guide your objection to the vaccination(s) listed above:

_____
_____
_____
_____
_____
_____

By signing and submitting this form, I acknowledge that I will not have any protection against disease that may be afforded by the vaccine(s) and knowingly agree to assume the risks associated with being a student at Johnson & Wales University and participating in university activities without the vaccine(s).

ln addition, I understand that in the event of an outbreak of a vaccine preventable disease, the university and/or the county or state Health Department may restrict my participation in university activities for my own protection and/or the protection of others.

I understand that my exemption status may be shared with other college officials as needed to coordinate services or otherwise as permitted by law.

Signature:_____ Date:_____
          Student (or parent/guardian if under age 18)

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