

# REQUEST FOR RELIGIOUS EXEMPTION TO IMMUNIZATION FORM

## PARENT/GUARDIAN STATEMENT

Name of Student: \_\_\_\_\_

Name of Parent(s)/Guardian(s): \_\_\_\_\_

School: Darrow School, 110 Darrow Road, New Lebanon, NY 12125

This form is for your use in applying for a religious exemption to Public Health Law immunization requirements for your child. Its purpose is to establish the religious basis for your request since the State permits exemptions on the basis of a sincere religious belief. Philosophical, political, scientific or sociological objections to immunization do not justify an exemption under Department of Health regulation 10 NYCRR, Section 66-1.3 (d), which requires submission of:

A written and signed statement parent(s) or guardian(s) of such child stating that the parent(s) or guardian(s) objects to their child's immunization due to sincere and genuine religious beliefs which prohibit the immunization of their child in which case the principal or person in charge may require supporting documents.

In the area provided below please provide your statement. The statement **must** address **all** of the following elements:

- Explain in your words why you are requesting this religious exemption.
- Describe the religious principles that guide your objection to immunization.
- Indicate whether you are opposed to all immunizations, and if not, the religious basis that prohibits particular immunizations.

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

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Request for Religious Exemption to Immunization Form—Parent/Guardian Statement continued (page 2 of 2)

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