

Student Health Services

MTSU Box 237
Murfreesboro, TN 37132
o: (615) 898-2988 • f: (615) 898-5004
mthealth@mtsu.edu



REQUEST FOR AN EXEMPTION FROM IMMUNIZATION REQUIREMENT: RELIGIOUS REASONS

I understand that Middle Tennessee State University in accordance with Tennessee Code concerning Immunization Against Certain Diseases Prior to School attendance requires proof of immunization with two doses of **Measles, Mumps, and Rubella** vaccines and two doses of **Varicella** vaccine administered on or after the first birthday. In order to live in on-campus housing, all incoming students 21 years and younger must provide proof of a **Meningitis** vaccine on or after their 16th birthday.

I request, in accordance with state and MTSU policy, an exemption from this requirement on the grounds that such immunizations conflict with my religious beliefs and practices, which I affirm under the penalty of perjury.

THIS FORM MUST BE SIGNED BEFORE A NOTARY.

Name _____
Last First Middle

Date _____ Student ID No. M _____

Signature _____

Parent or guardian signature _____
(Signature of parent or guardian required ONLY if student under 18 years of age)

Sworn and subscribed before me this _____ of _____ 20 _____

Notary Signature _____

Commission expires _____

NOTARY SEAL