

DePaul University

Religious Immunization Exemption



Student Information:		
Last Name	First Name and Middle Initial	Date of Birth (mm/dd/yyyy) ____/____/____
DePaul Student # ____-____-____	E-mail Address	Phone Number
Information regarding religious exemptions		
<p>A student may be exempted from the immunization requirements upon acceptance by the designated recordkeeping office of a written and signed statement by the student 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. (http://www.ilga.gov/commission/jcar/admincode/077/077006940C02100R.html)</p> <p>Please describe your objection below (attach another piece of paper if necessary):</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>		
<p>I hereby request the Religious 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 DePaul University Code of Student Responsibility.</p> <p>Student Signature : _____ Date: _____</p>		

The preferred method to submit immunization records is online in Campus Connect.
Additional methods are:

Fax:
Fax: (312) 476-3200

In Person:
DePaul Central – Lincoln Park, SAC 101
DePaul Central – Loop, DePaul Center 9th floor

Mail:
DePaul University
Office of the University Registrar
1 E. Jackson
Chicago, IL 60604

For more information visit go.depaul.edu/immunizations