The University of North Carolina at Chapel Hill

Division of Student Success
Health and Wellbeing

Campus Box 7470
320 Emergency Room Drive
Chapel Hill, NC 27599

919-966-2283 | immunizations@unc.edu

Request for Exemption from Immunization Requirements
Religious Beliefs and Practices

I understand that The University of North Carolina at Chapel Hill in accordance with North Carolina State Law concerning Submission of an Immunization Certificate to a College or University requires each student to submit a certificate of immunization or a record of immunization indicating that the student has received immunizations required by G.S. 130A-152.

I request an exemption from this requirement on the grounds that such immunization(s) conflict(s) with my religious beliefs and practices.

_____ _____
Signature of Student Date

_____ _____
Printed Name of Student PID #

_____ _____
Signature of Parent or Guardian Date
(if under 18 years of age)

Upload completed form to the open ConnectCarolina To Do list item to complete immunization requirements