



UNIVERSITY
OF HAWAII
HILO

EXEMPTION FROM MMR IMMUNIZATION

I understand that I am susceptible to measles (rubeola), mumps, rubella, and other vaccine preventable diseases. If at any time there is, in the opinion of the Department of Health, danger of an epidemic from measles (rubeola), mumps, rubella, or any communicable disease for which immunization is required, this exemption from immunization shall not be recognized. I understand that I will be excluded from school until the threat of an epidemic is over or I receive the proper immunization. (Hawaii Revised Statutes section 302A-1157).

I request an exemption from the immunization requirements for the following reason:

MEDICAL EXEMPTION:

Attach a letter signed by a U.S. licensed physician (M.D. or D.O.) on the physician's printed stationery stating that:

- 1) An MMR vaccination would endanger the student's health or life and specify the reason based on valid medical contraindications.
- 2) The length of time during which the vaccine would endanger the student's health or life.

RELIGIOUS EXEMPTION:

I certify that immunization conflicts with my bona fide religious tenets and practices.

Name _____ SID# _____ - _____

Address _____ UHH (check both if appropriate)

_____ HawCC

Date of Birth _____ Age _____ Phone _____

Signature _____ Date _____

If student is under 18, please have Parent/Guardian print and sign below.

Parent/Guardian Name (print) _____

Parent/Guardian Signature _____ Date _____

Student Medical Services
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