CHARDON LOCAL SCHOOLS

IMMUNIZATION EXEMPTION REQUEST

Ohio Revised Code Sections 3313.671, Part (4) and (5)

Section 3313.671, part (4): A pupil who presents a written statement of the pupil's parent or guardian in which the parent or guardian declines to have the pupil immunized for reasons of conscience, including religious convictions, is not required to be immunized.

Section 3313.671, part (5): A child whose physician certifies in writing that such immunization against any disease is medically contraindicated is not required to be immunized against that disease. I, the parent/guardian of the below named child, decline to have my child immunized for the immunizations checked below for the following reason(s): _____Pertussis _____Tetanus ____Polio ____MMR Diptheria Hepatitis B Varicella Meningitis Child's Name Reasons of conscience: Please explain._____ Medical Reason: You must obtain a signed statement from your physician stating the reason and attach it to this form. I further understand that during the course of an outbreak of any of the aforementioned vaccine preventable diseases that the student named here is subject to exclusion from school for the duration of the outbreak. This action is necessary not only to protect this student, but to protect the remainder of the students and faculty of the school. Parent's/Guardian's Signature _____ Address Date_