



## Preschool-12<sup>th</sup> Grade – Religious Immunization Exemption Certificate For Use in Public, Private and Charter Schools

Nevada State Immunization Program  $\cdot$  4150 Technology Way Suite 210  $\cdot$  Carson City, NV 89706 http://dpbh.nv.gov/Programs/Immunizations/ • (775) 684-5900 • nviz@health.nv.gov

## Instructions for completing a Religious Immunization Exemption Certificate

**Section 1:** Enter school and student information. **Section 2:** Have parent/guardian or student (if the student is 18 years of age or older) initial, sign, and date.

Parents / Guardians: Please turn this form into your child's school.

ction 3: For s	school use only: Obtain sc	hool signatures and da <sup>a</sup>	tes.			
lame of School (accepting exemption)		Street Address	City	Zip Code	Phone	
tudent's Name			Date of Birth	Grade/Level		
treet Address			City	Zip Code	Phone	
equest that th	he above student be exer	npt from the vaccine(s)	checked below based	l on my religiou	s beliefs:	
	☐ DTaP	☐ Hepatitis A [	☐ Hepatitis B ☐ I	PV		
	☐ MenACW	Y	☐ Td/Tdap ☐ V	/aricella		
	ne risks of refusing to vaccone and complete the requ		gious beliefs. I know th	at I may re-add	ress this	
Initials	I understand the risk of contracting the disease(s) that the vaccine(s) prevent.					
	I understand the risk of transmitting the disease(s) to others.					
Initials	I understand that, if an outbreak of vaccine-preventable disease should occur, an exempt student will be excluded from school by the school administrative head for a period of time as determined by the Nevac-Division of Public and Behavioral Health based on a case-by-case analysis of public health risk.					
Initials Initials	I understand that this	form must be submitt ict, charter school or pr	ed annually based on			
	Signature of Parent/Guardia (if the student is 18 years of			Date		
Section 3: For	School Official Use Only: I	Please provide date and	d signatures			
	School Nurse or Designee Signature			Date		
	School Board or Designe	e Signature		Date		
It is the responsib	School Board or Designe		ance with the regulations. I		ead of t	