

## Non-Medical Exemption for Religious, Moral or Ethical Beliefs Or Other Special Personal Circumstances

**DUE BY JANUARY 25, 2022 FOR SPRING 2022 NEW STUDENTS**

Students may request a non-medical exemption for 1) Religious, Moral or Ethical Beliefs or 2) Other Special Personal Circumstances.

**Instructions:** To request a non-medical exemption, please fill out and sign the form. You may submit additional supporting documentation, as listed below. Once completed, please do one to the following:

- **Upload** the completed form to your [electronic medical record](#) AND email the Health Center ([studenthealthcenter@jcu.edu](mailto:studenthealthcenter@jcu.edu)) to indicate this has been completed, OR
- **Drop Off** the completed form at the JCU Student Health and Wellness Center (located in the lower level of Murphy Hall), OR
- **Email** the completed form to [studenthealthcenter@jcu.edu](mailto:studenthealthcenter@jcu.edu), OR
- **Mail** the completed form to JCU Student Health Center, 1 John Carroll Blvd, University Heights, OH 44118.

The exemption request will be reviewed on a case-by-case basis by a Non-Medical Vaccination Exemption Committee.

The University reserves the right to request additional supporting documentation regarding the request, or to not review request forms that are incomplete.

Last Name _____		First Name _____	
Birth Date _____		Student ID _____	
		Semester Start 20 _____ (circle one) Fall Spring Summer	

The above-named student requests an exemption for the following vaccine(s) (check all that apply)

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|--------------------------------------|--|
| <input type="checkbox"/> Hepatitis B | <input type="checkbox"/> Meningococcal conjugate             |
| <input type="checkbox"/> Measles     | <input type="checkbox"/> Tetanus/Diphtheria/Pertussis (Tdap) |
| <input type="checkbox"/> Mumps       | <input type="checkbox"/> Varicella                           |
| <input type="checkbox"/> Rubella     | <input type="checkbox"/> COVID-19                            |

1. If JCU provides you with a non-medical exemption from the COVID-19 Vaccination Requirement, JCU may consider and require additional health and safety procedures, including mask obligations, physical distancing, and testing requirements. I acknowledge that, if my request for an exemption is granted, I will need to comply with such additional safety procedures as instructed by JCU.

2. I verify that the information I am submitting to substantiate my request for a non-medical exemption is true and accurate to the best of my knowledge.

The above-named student understands that by submitting the John Carroll University Non-Medical Exemption Form for one or more vaccines required by the Vaccination Requirement and if the exemption is granted, the student assumes the risk of not receiving one or more vaccinations, including but not limited to illness, health effects, or other consequences related to the imposition of health and safety protocols.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent (for student under 18 years of age) Signature \_\_\_\_\_ Date \_\_\_\_\_

**Support For Non-Medical Requests for Exemption from Vaccination Requirement for Religious, Moral or Ethical Beliefs, or Other Special Personal Circumstances**

The above-named student requests the following exemptions (please check all that apply):

Religious, Moral or Ethical Belief

- Please describe your sincerely held religious, moral or ethical belief that prevents you from complying with the JCU Vaccination Requirement.

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Other Special Personal Circumstances

- Please describe your special personal circumstances that prevent you from complying with the JCU Vaccination Requirement.

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Please answer the following questions:

1. Does your religious, moral or ethical belief or special personal circumstances prevent you from receiving vaccinations or other medical interventions, or prevent you from receiving a particular vaccination?

Yes  No

Please describe:

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2. Has your religious, moral or ethical belief or special personal circumstances prevented you from receiving other vaccinations in the past?

Yes  No

If you checked No, please explain why the vaccine for which you are seeking an exemption differs from the other vaccinations you have received, and why those vaccinations did not conflict with the religious, moral or ethical belief you described.

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3. Is your belief or personal circumstances you describe a specific tenet of your religion or your moral or ethical beliefs?

Yes     No

If you checked Yes, please describe:

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If you checked No, please describe how your religious, moral or ethical belief, or other special personal circumstances relate to your request for a non-medical exemption from the vaccination requirement.

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4. Please provide any additional information you believe would be helpful to JCU in evaluating the request for a non-medical exemption from JCU's Vaccination Requirement.

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While not required, you may choose to provide any supporting documentation of your sincerely held religious, moral or ethical belief or special personal circumstances that prevent you from complying with the JCU Vaccination Requirement and/or any additional information you believe may be of assistance as we review your request for non-medical exemption from the JCU Vaccination Requirement.

After your request has been reviewed and processed, you will be notified in writing if your request has been granted. Individuals may reapply if new documentation and information should become available to support a non-medical exemption.