

IMMUNIZATION EXEMPTION  
MEDICAL, RELIGIOUS OR PHILOSOPHICAL

Ohio Revised Code, Sections 3313.67 and 3313.671  
Fairfield Board of Education Policy JHCB

I, the parent or guardian of \_\_\_\_\_, hereby file an immunization exemption for my child for the following reasons:

\_\_\_\_\_ A child who presents a written statement from his parent or guardian, in which the parent or guardian objects to the immunization for good cause, including religious convictions, is not required to be immunized.

\_\_\_\_\_ 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. (Requires physician signature below)

This section does not limit or impair the right of the board of education of a city, exempted village, or local school district to make and enforce rules to secure immunizations required by state law.

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Please list immunizations to be exempted: \_\_\_\_\_

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I further understand that during the course of a school-based 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 your child, but the remainder of the students and faculty of the school.

Student's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Physician's Signature \_\_\_\_\_ Date \_\_\_\_\_