

# MARIA

COLLEGE

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## Religious COVID Vaccination Exemption Request

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

The purpose of this form is for use to apply for a religious exemption to the COVID-19 vaccine requirement. Philosophical, political, scientific, or sociological objections to immunizations do not justify an exemption

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I, \_\_\_\_\_, have read The Center for Disease Control education materials (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety.html>), vaccination fact sheets, and the most recent recommendations on safety and specific vaccine information. I understand the risks associated with not receiving the COVID-19 vaccine and am requesting a religious exemption from receiving said vaccine.

I understand that my COVID-19 vaccine exemption request for religious reasons may subject me to certain precautions as determined necessary by law, the New York State Department of Health, and/or Maria College. These may include, but are not limited to, continued participation in COVID-19 testing, physical distancing, exclusion from campus and/or campus related activities, and/or isolation and quarantine for a period of time to be determined by the College.

I understand that locations Maria College uses for clinical, internship, or other similar activities may require that students be vaccinated for COVID-19 and that Maria College will not be liable for securing clinical sites or for any costs for items such as missed classes due to injury or illness caused by COVID-19. Maria College will not be liable for any potential delay in graduation, degree conferral, or eligibility to test for licensure.

I understand I will be required to participate in continued COVID-19 precautions, per Maria College policies and procedures.

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

As part of this request, please provide a written statement explaining the religious basis for your request. This statement must address all of the following:

- Why, in your own words, you are requesting this religious exemption;
- Upon what religious authorities do you base your request? What are the religious principles that guide your objection to immunizations in general or the COVID-19 vaccination in particular?

You may provide, if you choose, other supporting materials.

### **For Use by Maria College:**

Religious Exemption Reviewed:  Accepted  Not Accepted Date \_\_\_\_\_

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