Phone: 716-829-3316 Fax: 716-829-2564

University at Buffalo Student Health Services COVID-19 Primary Vaccine Religious Exemption Request Form

Section I: Student Information

(to be completed by student or guardian (only if student is under 18 years old))

Last Name	First Name	Student Email	Date of Birth	UB Person #

Section II: Religious Beliefs Exemption Request

(to be completed by student or guardian (only if student is under 18 years old))

Requests for exemption based on religious beliefs: Students who hold genuine and sincere religious beliefs contrary to the COVID-19 vaccination may be exempt after submitting a written statement which includes an explanation of how receiving the COVID-19 vaccination conflicts with the student's sincere religious belief or practice. Inclusion of general philosophical, political, medical, or moral objections to the COVID-19 vaccine will result in a denial of a religious exemption request. The boxes below also must be marked to certify how not receiving the COVID-19 primary vaccination will not otherwise prevent the students' completion of the programmatic or curricular requirement of their academic program and how the student understands and agrees to abide by all COVID-19 health and safety restrictions.

Student statement:	
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I certify that I have confirmed with my academic proprevent my completion of the programmatic or curricula	gram that not receiving the COVID-19 vaccination/booster will not r requirements.
ealth and safety restrictions if accessing a SUNY facility,	osted against COVID-19, I will need to abide by all COVID-19 related including, but not limited to, use of face masks, physical distancing, a aware that students with approved exemptions can be excluded level of positive cases.
Student Signature:	Date:

Once completed, students should upload the signed form to the document upload section of Student Health Services' Portal at https://patientportal.buffalo.edu