

University at Buffalo Student Health Services
COVID-19 Primary Vaccine
Fully Remote Only Instruction Mode Exemption Request Form*

Section I: Student Information (to be completed by student or guardian, if student is under 18 years old)

Last Name	First Name	Student Email	Semester (Term & Year)	UB Person #

*Students enrolled in fully online degree program recognized by NYS Education Department and are enrolled only in online courses are automatically waived from the COVID-19 vaccine requirement and do not need to complete this form.

Section II: Remote Only Exemption Request (to be completed by student or guardian, if student is under 18 years old)

This form is required for students requesting an exemption from the COVID-19 primary vaccination requirement due to their status as a fully remote learner and are not enrolled in one of our [fully online degree programs](#).

1. I understand that all University at Buffalo (UB) students who have in-person classes or a physical presence on any UB's campuses must have completed the primary vaccination against COVID-19.
2. My signature below indicates that I am requesting an exemption from the COVID-19 primary vaccination requirement for the semester listed above, and that I attest I am/will register for remote instruction mode courses only and will not have a physical presence at any UB campus (i.e. classrooms, libraries, residence halls, arena) including for the purpose of using on-campus services, for the duration of the identified semester.
3. I understand that I cannot live in university-owned, operated housing (residence halls or apartments) while on a remote only exemption from the COVID-19 primary vaccination requirement.
4. I understand that if I want to register for only fully remote courses again during a subsequent semester, I will need to submit a new exemption request.
5. (Undergraduate Students only) I understand that all undergraduate degrees (except for the Nursing RN-BS and Engineering Science BS Online) are place-based. While the university will continue to offer some fully remote courses, it is not possible to complete an undergraduate degree without substantial in-person coursework.
6. I attest that if I must have an in-person presence at any UB campus after signing this form, that I will submit proof of COVID-19 primary vaccination to University at Buffalo Student Health Services in advance.
7. I have read and understand the foregoing statements and sign it with full knowledge of its meaning and content.

Signature of student or legal guardian if student is under 18 years old

Date

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

Uploaded exemption request forms will be reviewed. Decisions will be released through the Secure Messaging function of the Student Health Services' portal.