Religious Exemption
For Required Vaccinations

Instructions: Please print, read, and sign (student and religious leader). Form can be returned to Health Services using one of the following methods:

- Upload as an attachment in a secure message in the TheraNest Patient Portal (envelope icon) for students who have already created a Patient Portal account
- By mail: Carlow University Health Services, 3333 Fifth Ave., Pittsburgh, PA 15213
- By fax: 412-578-6468
- By email: hcs@carlow.edu

I affirm that immunization is in conflict with my religious beliefs.

Identify religion: ____________________________________________________________

Identify sincerely held religious belief forming the basis for objection:

__________________________________________________________________________

__________________________________________________________________________

Please note: Unvaccinated individuals for COVID-19 who are participating in the learning community and campus life will be expected to follow continued restrictions (such as mask wearing, social distancing, hand washing, and participation limitations) consistent with the CDC, Commonwealth of Pennsylvania, and Allegheny County Health Department recommendations. More specific expectations will be communicated as new information and guidance becomes available.

For Athletes and Residential Students: Documented religious exemptions will be reviewed by Health Services in conjunction with the Athletics medical team (trainers, physician), when appropriate, and applied as determined appropriate through the currently established process for exemption consideration.

Signature of student ________________________________ Date ______________

Printed name of student ________________________________________________

Signature of religious leader ________________________________ Date ______________

Printed name of religious leader __________________________________________

Contact phone number ________________________________________________