UNIVERSITY OF JUSTICE

COVID-19 Immunization Verification & Exemption Form

STUDENT IDENTIFICATION

Legal Name: **Student ID:**

DOB: **Phone:** **University Email:**

OPTION A: VACCINATION VERIFICATION

Attach a copy of your CDC Card or medical record.

Dose Type	Manufacturer	Date (MM/DD/YYYY)	Lot Number
1st Dose			
2nd Dose			
Booster(s)			

OPTION B: EXEMPTION REQUEST

☐ **Medical:** Contraindicated due to health conditions. (Requires Physician Certification below)

☐ **Religious/Conscience:** Based on sincere religious beliefs or philosophical convictions. (Requires Religious Certification below)

MEDICAL CERTIFICATION (PHYSICIAN ONLY)

Physician Name: **License No:**

Signature: **Facility Stamp:**

RELIGIOUS/CONSCIENCE CERTIFICATION

Official/Clergy Name (if applicable): **Organization/Affiliation:**

Signature of Official or Notary: **Notary Seal:**

ACKNOWLEDGE & SUBMIT

I certify that the information provided is accurate. Unvaccinated individuals may be subject to additional safety protocols (testing, masking) and temporary campus exclusion during outbreaks.

Student Signature: **Date:**

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Exemption Policy & Submission Guidelines

1. MEDICAL CONTRAINDICATIONS

Grants when a person has a health condition making vaccination unsafe. A licensed physician must document the specific contraindication annually.

Condition	Rationale
Severe Allergic Reaction	Immune system could trigger life-threatening reaction.
Immunocompromised	Vaccine may not provide adequate protection.
Acute Febrile Illness	Postpone until recovery to avoid confounding side-effects.

2. RELIGIOUS & PHILOSOPHICAL BELIEFS

Religious: Protected under RFRA/ADA for sincere spiritual teachings. Verification requires a written affidavit or clergy signature.
Philosophical/Personal: Moral or political grounds not tied to medical/religious doctrine. Acceptance varies and may require alternative safety measures.

3. PRIOR ADVERSE REACTIONS

Includes severe myocarditis/pericarditis or TTS. Medical evaluation is required to assess if the reaction qualifies as a clinical contraindication.

SUBMISSION PROCESS (5-10 DAY REVIEW)

1. Verify Eligibility
2. Gather Documentation
3. Submit Form
4. Await Review
5. Plan Alternatives

RESOURCES & REFERENCES

- CDC: COVID-19 Vaccination Considerations (Jan 2026)
- HHS: Guidance on Religious and Philosophical Exemptions (Oct 2024)
- WHO: COVID-19 Vaccine Safety Recommendations (2025)
- University Portal: **www.universityofjustice.us**

Contact: Feel free to contact the Office of Admission anytime before submitting this form.