



STATEMENT OF EXEMPTION FROM IMMUNIZATIONS

Under the Louisiana Revised Statutes 17:170 Sec E, I _____,
hereby claim exemption from the immunization requirements for my child due to
medical, religious, or philosophical reasons.

I understand that in the event of an outbreak of a vaccine-preventable disease at the location of the educational institution or facility the student attends, the administrators of the educational institution or facility, upon the recommendation of the office of public health, may exclude the student from attendance until the incubation period has expired or I present evidence of immunization.

Name of School

Signature of Student & Date

Signature of Authorized District or School Representative Date