Oakwood City School District Immunization Exemption

Name of Student School Date of Birth

Section 3313.671, Part (4): A pupil who presents a written statement of his parent or guardian in which the parent or guardian objects to the immunization for good cause, including religious convictions, is not required to be immunized.

Sections 3313.671 Part (5): A child whose physician certifies in writing that such immunization against any disease is medically contraindicated is not required to be immunized against that disease. This section does not limit or impair the right of a Board of Education of a city, exempted village, or local school district to make and enforce rules to secure immunization against poliomyelitis, rubeola, rubella, diphtheria, pertussis and tetanus of the pupils under its jurisdiction.

As required under the compulsory Immunization Law (Ohio Revised Code, Section 3313.671), I, the parent/guardian of the above named student object to having the following immunizations for the following reason(s):

You must check the	appropriate box(s) AND	explain your answer.	
[] Has had the nate	ural disease: (check tho	se that apply)	
[] MMR	Date:		
[] Varicella	Date:		
[] Pertussis	Date:		
[] Religious/Philos	ophical Objections:		
[] Medical Objection [] MUST be accompan		licensed health care provider (MD, DO	, PA, or CNP) supporting the need
for this exemption.			
[] DTap/DTP/Tdap		[] MMR	
[] Polio		[]Varicella	
[] Hepatitis B [] Other		[]Hib	
student named ab	ove is subject to EXCLU	oreak of any of the aforementioned vac SION from school for the duration of the , but the remainder of the students and	he outbreak. This action is
Parent/Guardian S	ignature:		
Address:			Date: