

**Certification of Religious, Philosophical or Moral Belief Exception
to the North Dakota State Board of Higher Education**

Preadmission Requirement

I request to be exempted from the North Dakota State Board of Higher Education requirement to provide proof of immunity against measles, mumps and rubella (German measles) prior to enrollment at any North Dakota state college or university. I hereby certify that my sincere and genuine religious beliefs, philosophical or moral preclude my participation in an immunization program.

(Explain the basis, in detail, of your religious, philosophical or moral objections to immunization in the space below. You may add extra pages if needed. Identify the length of time you have held this religious, philosophical or moral belief. Also identify whether you are a member of any particular faith, denomination or church which forms the basis for your objection.)

I understand that requesting this exception does carry some risk. In the event that an outbreak of measles, mumps or rubella is declared I will be required to stay away from campus until the outbreak is resolved. The North Dakota State Department of Health defines an outbreak as one case. The length of an outbreak could be from two to six or more weeks depending on the severity of the outbreak.

I understand that by signing this form I am accepting the conditions of this exception and will comply with these restrictions.

_____	_____/_____/_____
Name (last name, first name, middle initial — please print)	Date of Birth
_____	_____/_____/_____
Student's Signature	Date of Signature
_____	(_____)_____
Local Address and Telephone Number (please keep these current at all times — promptly report any changes to the Registrar's Office in 110 Ceres Hall)	

On this _____ day of _____, _____, before me, _____, the undersigned officer, personally appeared _____, subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

(SEAL)

Notary Public Signature

My commission expires ____/____/_____