



Immunization Waiver Form

I, _____ am
opposed to immunization based on sincerely held religious beliefs or for moral,
philosophical, or other personal reasons. I have requested and received an exemption to
Maine State Law (22-MRSA 6359) regarding immunization for Measles, Mumps,
Rubella, and Diphtheria/Tetanus. I understand and agree that in the event of an outbreak
of any of the above mentioned diseases on the UMM campus:

1. I will remain off campus and not attend classes for the period of danger as
defined by UMM or,
2. I will obtain immunization and remain off campus and not attend classes
for a period of time equal to one incubation period of the disease after
obtaining the immunization. If I obtain immunization, I will bring
verification of same to the Student Life Office prior to attending classes or
returning to campus for any reason.

Date

Signature