

BOURNE PUBLIC SCHOOLS

REQUEST FOR EXEMPTION FROM IMMUNIZATIONS

Starting in the Fall of 2018, The Massachusetts Department of Public Health is requiring parents complete this immunization exemption form each year.

To the Nurse of _____ School:

As the parent/Guardian of _____, a minor enrolled in the Bourne Public Schools, I hereby request that said minor be exempt from _____ immunization requirement(s) under laws of the Commonwealth of Massachusetts.

The reason for this request is:

___ medical ___ religious.

Supportive documentation in attached.

Date

Signature of parent or Guardian

Note: Medical exemptions will require a physician's statement and a signature justifying same.

Documentation for religious exemption request will be determined by the Superintendent of Schools.

Form revised 6/15/2018 to reflect the new requirement for yearly documentation starting the fall of 2018.