STATEMENT OF IMMUNIZATION HISTORY; WAIVER; RULES - INDIANA CODE §20-34-4-5

(a) Each school shall require the parent of a student who has enrolled in the school to furnish **not later than the first day of school** a written statement of the student's immunization, accompanied by the physician's certificates or other documentation, unless a written statement of this nature is on file with the school.
(b) The statement must show, except for a student to whom IC 20-34-3-2 or IC 20-34-3-3 applies, that the student has been immunized as required under section 2 of this chapter. The statement must include the student's date of birth and the date of each immunization.

VACCINATION EXEMPTION PURSUANT TO INDIANA CODE §20-34-3-2

(a) Except as otherwise provided, a student may not be required to undergo any testing, examination, immunization, or treatment required under this chapter or IC 20-34-4 when the child's parent objects on religious grounds. A religious objection does not exempt a child from any testing, examination, immunization, or treatment required under this chapter or IC 20-34-4 unless the objection is:
(1) made in writing;
(2) signed by the child's parent; and
(3) delivered to the child's teacher or to the individual who might order a test, an exam, an immunization, or a treatment absent the objection.

VACCINE EXEMPTION FORM

I,_____, as the parent, guardian or person in
(insert your name)
loco parentis of the child _____, hereby certify that the
(insert your child's name)
administration of any vaccine or other immunizing agents is contrary to our personal religious beliefs.

- ☐ Tetanus
- ☐ Diphtheria
- ☐ Pertussis
- ☐ Polio
- ☐ Hepatitis A
- ☐ Hepatitis B
- ☐ Meningitis
- ☐ Measles
- ☐ Mumps
- ☐ Rubella
- ☐ Varicella
- ☐ Haemophilus influenzae type b
- ☐ Other _____

This is pursuant to my right to refuse vaccination on the grounds that vaccinations conflict with my religious beliefs. Pursuant to Indiana statute I am providing a copy of this statement to our child's school administrator or operator of the group program pursuant to IC § 20-34-3-2.

Parent _____ Date _____