



Immunization

Non-Medical Exemption Form (Religious and Personal Belief)

Vaccines are one of the greatest public health achievements of the past century and save an estimated 3 million lives every year. The Colorado Department of Public Health and Environment and Fort Lewis College strongly support vaccination as one of the easiest and most effective tools in preventing diseases that can cause serious illness and even death. For nearly all people, the benefits of preventing disease with a vaccine far outweigh the risks. **Declining to follow the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) immunization schedule for number, space and timing of doses, may endanger an unvaccinated individual's health and others who come into contact with them.**

Colorado law C.R.S. § 25-4-902 requires all students attending any school in the state of Colorado to be vaccinated against certain vaccine-preventable diseases (i.e., Measles, Mumps, Rubella) as established by Colorado Board of Health rule 6 CCR 1009-2, unless an exemption is filed. While the Board of Health does not currently require vaccination against COVID-19, Fort Lewis College's COVID-19 Vaccination Policy extends this requirement to the COVID-19 vaccination unless an exemption is filed, and voluntarily adopts the principles described in § 25-4-903, C.R.S. (Exemptions from immunization—rules) for the purposes of the College's COVID-19 Vaccination Policy.

Students with a recorded immunization exemption may be kept out of school during a disease outbreak; the length of time will vary depending on the type of the disease and the circumstances of the outbreak.

Please complete all required fields below and upload the form to Fort Lewis College Health Center's [secure portal](#), incomplete forms will not be accepted. *All fields are required unless noted optional.*

Type of Non-Medical Exemption Claimed: ☐ Personal Belief ☐ Religious

Student Information:

Last Name:	First Name:	Middle Name:
Date of Birth:	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> X	

Parent/Guardian completing this form (Only if student is under 18 years old):

Last Name:	First Name:	Middle Name:
Relationship to student: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian		

School Information:

School Name: Fort Lewis College		
Address: 1000 Rim Drive		
City: Durango	State: Colorado	Zip Code: 81301

Vaccine Preventable Disease Information

The information provided below is to ensure parents/guardians/students are informed about the risks of not vaccinating.

SARS-CoV-2 (COVID-19) – Unvaccinated persons may be at increased risk of developing COVID-19 if exposed to this disease. Serious symptoms and effects include difficulty breathing, loss of taste or smell, body aches, and death. For more information: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/keythingstoknow.html>

Required Vaccine for School Entry

Check vaccine declined:	
<input type="checkbox"/>	SARS-CoV-2 (COVID-19)

Statement of Exemption

I am the student or parent/guardian (if student is under 18 years of age) of the above-named student and am declining the vaccine(s) indicated above due to a religious or personal belief that is opposed to vaccines. The information I have provided on this form is complete and accurate.

- I may change my mind at any time and accept vaccination(s) for my myself/child in the future.
- I have had to opportunity to review the vaccine information provided by the Colorado Department of Public Health and Environment: [Immunization education](#) and [Immunize for Good](#) for information on the benefits and risks of vaccines and the diseases they prevent.
- I have had to opportunity to review information about what is in the [mRNA based Vaccines](#) (Pfizer and Moderna) and how they work.

I acknowledge that I have read this document in its entirety.

Student signature (or Parent or Guardian if student is under 18): _____ Date: _____

Under Colorado law, you have the option to exclude your information from the Colorado Immunization Information System (CIIS). To opt out of CIIS, go to: www.colorado.gov/cdphe/ciis-opt-out-procedures. Please be advised that you will be responsible for maintaining your immunization records to ensure school compliance.