



## Request for Medical Exemption for Immunizations

**Student Name** \_\_\_\_\_

**Class Year** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

The above named student requests a waiver for the following immunizations required by New York State Law or Hamilton College.

- All required immunization
- Diphtheria/Tetanus: One dose of Tetanus/Diphtheria (td) or Tetanus/Diphtheria/Pertussis (Tdap) given within 10 years prior to enrollment.
- Measles, Mumps and Rubella: Two doses of MMR (measles, mumps and rubella) vaccine administered after the first birthday.
- COVID-19: Primary series completed and boosted when eligible.

Your physician will also need to complete the Hamilton College Provider Immunization Exemption Form following your completion of this form. Medical Exemptions will not be approved without receiving both the Immunization Exemption form and the Provider Immunization Exemption Form. All requests for medical exemptions are subject to the review and approval by the Medical Director of Hamilton College Student Health Services.

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Medical exemptions to receiving tetanus-diphtheria toxoid are limited to: 1.) having received tetanus toxoid or tetanus-diphtheria toxoid within 5 years of enrollment; 2.) a hypersensitivity reaction to a prior dose of tetanus toxoid or tetanus-diphtheria toxoid.

Medical exemptions to receiving measles, mumps and rubella vaccine (MMR) are limited to: 1.) pregnancy, or students planning to become pregnant within 3 months; 2.) a history of anaphylactic reaction following egg ingestion or receipt of neomycin; 3.) students with altered immunocompetence.

Medical exemptions to receiving a COVID-19 vaccine are limited to; 1.) a severe allergic reaction or a severe hypersensitivity reaction to a prior dose of COVID-19; 2.) a non-severe allergic reaction or a non-severe hypersensitivity reaction to a prior dose of COVID-19 within 4 hours of receiving

the dose; examples include hives, swelling and wheezing; 3.) individuals with underlying medical conditions such as weakened immune systems, autoimmune conditions or other underlying medical conditions following recommendations from a licensed physician, nurse practitioner or physician assistant.

**Exclusion from school when one or more cases of COVID-19, Measles, Mumps and Rubella are present.**

I understand that I may be excluded from school when, in the opinion of a public health official, my continued presence in school poses a clear danger to the health of others. Depending on disease type, the length of time I may be excluded can vary. If I choose to receive an immunization following the identification of a disease, I may have to wait one incubation period following the date of immunization before returning to school (with incubation periods ranging from 16 to 23 days, depending on the disease). The incubation period of each disease is different, and recommendations on exclusion will be made by the Medical Director of Hamilton College Student Health Services, and his/her designee, in conjunction with public health officials including the New York State CDC. The documented occurrence of a single case of any of the following diseases including, but not limited to COVID-19, measles, mumps, rubella, diphtheria, or pertussis may be interpreted as a clear danger to the health of others. I understand that if I am excluded I may need to withdraw from the college for the remainder of the semester or longer, depending on the timing and length of incubation period.

I also understand that Hamilton College cannot predict communicable disease outbreaks and if such an event were to occur Hamilton College Student Health Services and Hamilton College will work diligently with public health officials to ensure the safest and most comprehensive care for students on campus. This may include changes to the above periods of danger and additional recommendations for diseases not listed here.

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Signature of Student

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Date

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If student is under 18, Signature of Parent/Guardian

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Date