

## Trinity College

### **Mandatory COVID-19 Immunization Religious Exemption Request & Waiver of Responsibility**

I am requesting exemption from the Trinity College's mandatory COVID-19 vaccine, for religious reasons. (Philosophical exemptions are not recognized nor allowed and are not accepted by the College.)

In doing so, my signature below attests that I understand:

- Vaccines protect my personal health and the public health of the community.
- Religious exemption is allowed if a student 18 or older (and parent/guardian, if student is under 18) submits a written, signed, and dated statement that immunization against the COVID-19 virus conflicts with sincerely held religious beliefs, and the exemption would not create an undue burden for Trinity College.
- In the event of an identified public health risk, emergency, outbreak, or epidemic, exempt individuals may be isolated and/or excluded from campus in the interest of health and safety, including but not limited to all classes, activities, travel, and on-campus housing.
- Any student seeking exemption must submit a written statement requesting exemption along with this signed waiver form to the Office of the Dean of Student Life.

I \_\_\_\_\_ Date of Birth \_\_\_\_\_, have reviewed the above exemption information and request exemption from immunization against the COVID-19 virus, for religious reasons.

Please refer to my attached written statement that explains my reasoning regarding this request.

#### **APPLICABLE TO ALL APPROVED APPLICATIONS:**

I understand the risks of being non-immunized from COVID-19 in a densely populated campus environment where I will come into close contact with others who might carry and/or transmit the COVID-19 virus, and I have had an opportunity to discuss this risk with a medical provider. If my application is approved and I choose not to be vaccinated, I release Trinity College and its trustees, employees, and agents from all responsibility for any resulting injury or illness I might incur due to contracting COVID-19. I also acknowledge and agree to comply with the following requirements for non-immunized students:

- a. I will always wear a mask outside of my private residential space and restroom.
- b. I am not required to explain the reason for the exemption, but I will inform my housemates and/or roommates that I have an exemption.

- c. If I test positive for COVID-19, I may be excluded from campus for a period of 10 days, and if my residence is within a reasonable distance from campus (four hours or less by car), I will be expected to recuperate there.
- d. If illness necessitates my exclusion from campus, I will bear any and all associated expense, and I accept the risk that remote education may not be available during my exclusion.
- e. I will be tested at the college Health Center on a weekly basis.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
**Parent/Guardian signature required for students under the age of 18**

Printed name of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_ Date: \_\_\_\_\_