



COVID-19 Vaccination Requirement & Exemption Information

Any student enrolled at Franklin Pierce University, residential or commuter, who will have a physical presence anywhere on our Rindge Campus or in our Centers is required to complete a COVID-19 vaccination protocol prior to the start of the fall 2022 semester or term.

A copy of the student's **COVID-19 Vaccination Record Card** must be on file with Health Services in Rindge, N.H., or with the program director in Lebanon or Manchester, N.H. and Goodyear, Ariz.

Online or fully remote students are required to submit a copy of their completed COVID-19 Vaccination Record Card to Health Services prior to physically coming to our Rindge Campus or Centers.

Only two exemptions will exist for this COVID-19 Vaccination requirement: medical or religious. To be considered for exemption, the student must complete the form below and submit it to healthservices@franklinpierce.edu. Students seeking an exemption must be approved by Health Services prior to the start of the fall semester or term.

An exemption decision will be communicated to students via their Franklin Pierce email.

Each exemption will be subject to re-approval per the designated process. An exemption will be in place for a full academic year, two consecutive semesters or four consecutive terms. Documentation of approved exemption will be stored in the student's health file at Health Services for the entirety of the enrollment period.

Students who fail to adhere to this policy may be subject to immediate quarantine/isolation, restriction from attending in-person classes and events, removal from campus, and/or further conduct review and sanctioning if appropriate.



HEALTH SERVICES
40 UNIVERSITY DRIVE, RINDGE, NH 03461
(603) 899-4130
healthservices@franklinpierce.edu

REQUEST FOR EXEMPTION TO IMMUNIZATION

Name: _____

Date of Birth: _____ Student ID #: _____

Address: _____

I am requesting a:

Medical Exemption: A medical exemption request must be accompanied by a letter from a physician, APRN, or physician assistant that verifies the presence of a physical condition that would cause an endangerment to life or health, or is medically contraindicated if vaccinated. The letter should include the physician or APRN's name, contact information, signature and National Provider Identifier, or NPI, for verification.

Religious Exemption: Those seeking a religious exemption should provide documentation from a faith leader confirming the religious belief(s) that support such an exemption and will arrange for a discussion with the Dean of Student Affairs or designee regarding the religious belief(s) that support such an exemption.

- Submit the documentation to healthservices@franklinpierce.edu
- Schedule a discussion by emailing religousexempt@franklinpierce.edu.

Furthermore, if approved for exemption, I understand and agree to adherence of the following as deemed necessary by the Director of Health Services:

- I. Required consent and participation in testing protocols,
- II. Required consent and participation in active preventative measures such as but not limited to: adherence to occupancy limits, mask wearing, or quarantine, isolation, and participation in contact tracing; and/or,
- III. In the event of an outbreak of vaccine-preventable disease, temporary removal, physically, from campus facilities and/or grounds; and/or temporary restriction from physical participation in University sponsored activities, athletics, or physical engagement in University clubs or organizations. Depending upon the outbreak, this could be for an indeterminate amount of time, but generally will end after the incubation period from the last identified case of the communicable disease has passed. Any eligible related refunds would be in accordance with published university refund policies.
- IV. The University reserves the right to begin charging for weekly testing, or support services that may be required in the event of a positive COVID-19 test.

Student Signature: _____ Date: _____

Parent/Legal Guardian Signature: _____ Date: _____
(If student younger than 18)