



City of Milford, Connecticut

- Founded 1639 -

Health Department

Deepa D. Joseph, MPH
Health Director

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Dear Parents/Guardian of Milford students(s):

The purpose of this memo is to inform you of changes to the school immunization religious exemption statute, which went into effect on July 1, 2015.

The state legislature amended the statute governing immunization exemptions (Conn. Gen. Statute 10-204a) to include the following requirements:

1. To claim an immunization exemption based on religious beliefs, a child's parent or guardian must present a signed statement that such immunization would be contrary to the religious beliefs of the child or the parent/guardian of a child.
2. The statement must be signed in the presence of a judge or family support magistrate, a clerk or deputy clerk of a court having a seal, a town clerk, a notary public, a justice of the peace or an attorney licensed to practice in the State of Connecticut.
3. The amended statute requires the statement to be presented before a child can be enrolled in any public or non-public school program and before a child can enter seventh grade.

Enclosed is a revised Religious Exemption form. Please complete this form and have it "acknowledged" by one of those listed on the form.

***** This form must be completed in order for your child to attend school in August. *****

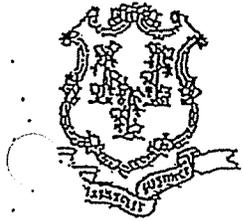
Should you have any questions or concerns, please contact Joan Campbell, Director of Nursing, at 203-783-3314. Thank you in advance for your cooperation.

Sincerely,

A handwritten signature in black ink, appearing to read "Deepa D. Joseph".

Deepa D. Joseph, MPH
Health Director

RE MHD 43
2/06, 01/15; 11/16



State of Connecticut
 Department of Public Health
 Religious Exemption Statement

 (Printed full, legal name of student)

I, the undersigned, do hereby swear or affirm, as the case may be as follows:

1. I am making this Religious Exemption Statement pursuant to Conn. Gen. Stat. § 10-204a so that the student may enroll in school for the first time or enter seventh grade at _____ school.
2. I am the lawful parent guardian of the student.
3. Immunizing said student would be contrary to student's parent's guardian's religious beliefs.
4. I understand that by claiming this exemption the student shall be exempt from the immunizations required by Conn. Gen. Stat. §§ 10-204a and 19a-7f.
5. I understand that during a vaccine-preventable disease outbreak at the above-identified school, all susceptible children, including the student will be excluded from school if a public health official determines that the school is a significant site for disease exposure, transmission and spread into the community. In such case, such children, including the student shall be excluded from school until: (1) the public health official determines that the outbreak danger has ended; (2) the child becomes ill with the disease and completely recovers from it; (3) the child is vaccinated according to public health protocol; or (4) the child has proof of immunity to the disease.

 Name(s) of Parent(s)

 Signature of Parent(s)/Guardian(s) Date

 Name(s) of Parent(s)

 Signature of Parent(s)/Guardian(s) Date

 Address (Street & House or Apt. no.)

 Telephone(s) no.

 City, State and Zip Code

TO CLAIM A RELIGIOUS EXEMPTION, AN EXEMPTION FORM MUST BE SUBMITTED TO THE PUBLIC OR NON-PUBLIC SCHOOL BEFORE ENROLLING IN THE SCHOOL FOR THE FIRST TIME AND BEFORE ENTERING SEVENTH (7TH) GRADE.

ACKNOWLEDGEMENT

STATE OF CONNECTICUT :
COUNTY OF _____ : ss:

On this the ___ day of _____, _____, before me, _____ the undersigned officer, personally appeared _____ known to me (or satisfactorily proven) to be the person whose name he or she subscribed to the within instrument and acknowledged that he or she executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand.

Judge
Family Support Magistrate
Clerk/Deputy Clerk (include seal)
Town Clerk
Notary Public My Commission expires (_____))
Justice of the Peace
Commissioner of the Superior Court (bar no _____)