TEIKYO POST UNIVERSITY

800 Country Club Road, P.O. Box 2540, Waterbury, CT 06723

Immunization Waiver Form for Online Students

Students attending classroom courses at Teikyo Post University main campus or branch campuses are required to submit proof of immunization for measles/rubella. Please indicate by your signature below that you are taking classes in our Distance Learning Program *only* and will not be attending Teikyo Post University's classroom courses.

I will not be attending classroom courses at Teikyo Post University.

Name (signature)

Social Security Number

Name (please print) Date

I plan on receiving my degree from _____(college or university).

Please Note: If your status as a Distance Learning student changes and you *do* wish to attend classroom courses, you will be advised to submit proof of immunization for measles/rubella.

If you have any questions, please contact Geraldine Kiley in the Registrar's Office at (203) 596-4617 or Health Services (203) 596-4503.

If you are receiving this form as an email attachment, please print, complete and sign the form and fax it back to the attention of Geraldine Kiley.

FAX THIS FORM TO (203) 596-4699