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COVID-19 Vaccination Exemption Request Form

Please complete this form and submit it to covidvaccination@bc.edu. Completion of this form will serve as your request to be exempt from the required COVID-19 vaccination of all ^{students}. This information and other related documentation will be treated confidentially.

Name:

Email:

Eagle ID

:

Mobile Phone:

Campus Address:

EXEMPTION REQUEST

Please check reason for your exemption request:

Medical

Religious

Other special circumstance (please describe below)

Please describe your special circumstance for requesting an exemption from the required COVID-19 vaccination.

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