

Bacterial Meningitis Medical Exception TAMIU Student Health Services

To claim a medical exception from the bacterial meningitis vaccine requirement set forth by Texas Senate Bill 1107, a student must submit an affidavit signed by a physician who is duly registered and licensed to practice medicine in the United States. The affidavit must state that, in the physician's opinion, the vaccination required would be injurious to the health and well-being of the student.

Section A: This section should be completed by the student:

Last Name:		First Name:			
Student ID #: A		Date of Birth: _	/	'	
Telephone Number:		Email Address:_		Day	
Section B: This	section should be completed by the	he physician:			
In my opinion, t and well-being o	the required vaccination (bacterial of this student.	meningitis) would b	e injui	rious to th	e health
Physician's Signature:		Date:		<u>'</u>	
Physician's Nam	ne (please print):				
	Last Name			st Name	
	Physician or Practice's Stamp:				
SHS-F4					

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