



BILL HASLAM  
GOVERNOR

STATE OF TENNESSEE  
DEPARTMENT OF EDUCATION  
6" FLOOR, ANDREW JOHNSON TOWER  
710 JAMES ROBERTSON PARKWAY  
NASHVILLE, TN 37243-0375

CANDICE MCQUEEN  
COMMISSIONER

## Religious Exemption from Vaccination(s)

Child's Name -----

Parent/Legal Guardian Name -----

Address \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

**Pursuant to Tennessee Code Annotated §49-6-5001(b)(2), I am declining vaccination(s) for my child because the vaccinations conflict with my religious tenets and practices.**

**I declare under penalty of perjury that the foregoing is true and correct.**

**Parent/Legal Guardian Signature**

\_\_\_\_\_

**Date** -----