FORM F-3 **Template 3** · **How to use**

Template 3: Statement of Adherence to a Religious Doctrine

For Kansas and South Dakota, whose statutes require a statement that the child adheres to a religious doctrine or denomination whose teachings oppose immunization.

States in Category 3: Kansas, South Dakota.

Notes

- **Kansas:** the statute's language is that the child is an adherent of a religious denomination whose religious teachings are opposed to such tests or inoculations. Use that framing.
- **South Dakota:** the Department of Health's Certificate of Immunization is the usual vehicle for the statement; ask your school. No notary is required.
- A school may ask whether your belief is sincerely held. Courts and agencies look at sincerity, not at whether your denomination's leaders share the belief.

Next: the fill-in sheet (Form F-3) and then the letter follow on the next pages.

BEFORE YOU FILE

Check your state first. Confirm the current form, deadline and filing office with your state or county health department before filing.

In most states this template accompanies an official form and does not replace it. Use your state's current official form wherever one exists, and do not alter it.

Fill in the sheet, print the letter, sign it in ink, keep a copy, and ask for written confirmation that it was received.

FORM F-3 Template 3 · Fill-in sheet

Your answers appear in the letter on the next page automatically.

Complete the fields, then print, sign and file the letter with the documents your state requires.

Fields

Parent/Guardian Name	
Address	
City, State, ZIP Code	
Email Address	
Phone Number	
Date	
School Name	
School Address	
School Official's Name	
Child's Full Name	
City, State	
State statute or rule (from your state's entry)	
Religious denomination or faith	
Your belief, in your own words (use only what is true for you)	
Scope of the exemption (all, or list the vaccines)	

Signature: Date:

FORM F-3 **Template 3 · Letter**

To:

Subject: Religious Exemption from Immunization Requirements

Dear ,

I, , am the parent/legal guardian of , a student at in .

Under , I submit this statement. My child is an adherent of , whose religious teachings are opposed to immunization.

Statement of Religious Belief

I request that my child be exempted from under state law. Please confirm receipt in writing. I can be reached at or .

Sincerely,

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