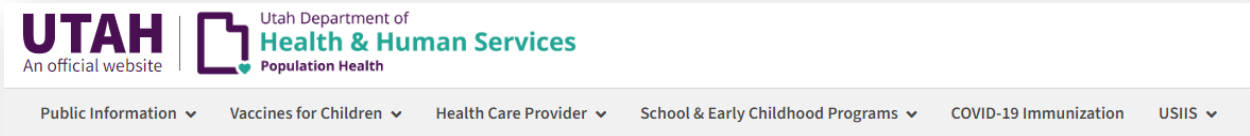


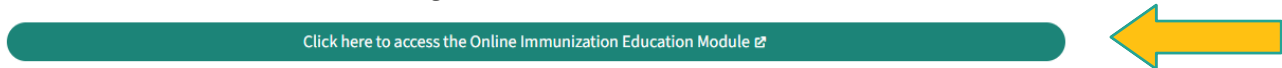
# IMMUNIZATION EXEMPTIONS


For children, whose legal guardian claims an exemption to immunization for medical, religious, or personal reasons, the legal guardian must complete an online immunization education module at [immunize.utah.gov](https://immunize.utah.gov) or an in-person consultation at a local health department. A copy of the certificate must be presented to the school or childcare official. For more information about exemption laws and rules see [immunize.utah.gov/immunization-exemptions/](https://immunize.utah.gov/immunization-exemptions/).

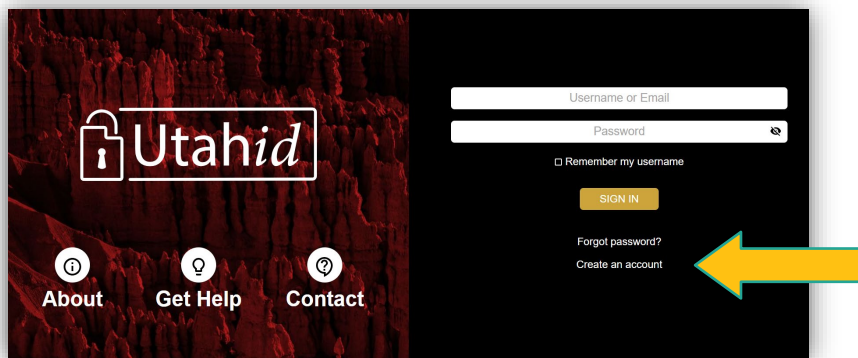
1. Access the Education portal from [immunize.utah.gov](https://immunize.utah.gov).
2. Hover over "School & Early Childhood Program Requirements".



3. Click on "Immunization Education Module (Exemptions)".
4. Scroll down and click the green icon to access the Online Immunization Education Module.



5.  Sign in if you already have an account *or* create an account with a new user ID and password. For additional assistance, please visit [idhelp.utah.gov](https://idhelp.utah.gov) for detailed instructions and an instructional video under "Account Creation".



6. Enter user information. The user is the legally responsible adult.

**Instructions**

1. Note: Using names and contact data that match medical records will help you have access to immunization records.  
2. Click on the I have read and accept the Terms of service link below to read and accept the terms of service.

Name:

First Name	Middle Name	Last Name
Phone Number	Email	Birthdate (mm/dd/yyyy)
Street Address	City	State
<input type="checkbox"/> I have read and accept the Terms of service		

Save   Reset   Cancel

7. Click "Accept Terms of Service" and a pop-up of "Terms of Service" will appear to read and accept.

**Terms**

**Terms of Service**

I am using the Personal Immunization Portal (PIP) to access my own personal information or information of another of which I am the legal parent or guardian, using my legal identity. I am not using PIP representing another person or using another person's information or identity, even if I have that person's written permission.

I understand that PIP and immunization records contain confidential information protected under Utah Code Annotated.

I consent to the monitoring and recording of my use of PIP, including any electronic communications (such as click-to-chat or messaging).

I understand that it is a crime to:

- Give false or misleading statements to obtain information in government records;
- Give false or misleading information to obtain or alter confidential records; or
- Deceive the State of Utah about an individual's identity.

I understand that unauthorized use of PIP is a misrepresentation of my identity to the state government and could subject me to criminal or civil penalties, or both.

I understand that the state of Utah may stop me from using PIP if it finds or suspects misuse.

I accept that the responsibility to properly protect any information provided to me by Utah Department of Health. I am the responsible party should any information on or from my computer or other device be improperly disclosed.

[✓ I have read and accept the Terms of service](#) [✕ Cancel](#)

8. Click "Begin" to take the Education module. The Educational module will take approximately 15 minutes

*\*Note: Once you have begun the module, you have 3 days to complete it and add exemptions. Progress will be saved for the 3 days.*

**Exemptions** Home Logout

Logged in as: Jesus Hurtado (jhurtado@utah.gov) Language English

**Immunization Exemption Introduction**

Schools require that immunizations are current for attending students. Follow the steps below to decide if you wish to immunize your child or have your child be exempt.

**Things to keep in mind before you begin.**


1. After you click Begin, you will have 3 days to complete the education and select exemptions.
2. Completed exemption forms may be downloaded after the three days as long as they are still valid and available.

[Begin](#)

9. Click "Add Child":
- a. Enter the information of the child.
  - b. Accept Terms of Service.
  - c. Save information.

**Exemption Forms**

Contact Information	Exemptions	Edit	Download
<a href="#">(Main User) Edit</a> 123 ABC St., Salt Lake City UT 12345 <a href="#">New Exemption</a>	No exemptions selected		
Jonny Doe <a href="#">Edit</a> 123 ABC St., Salt Lake City UT 12345 <a href="#">New Exemption</a>	Grade K-5	<a href="#">Edit</a>	<a href="#">Download</a> <a href="#">Delete</a>
<a href="#">Add Child</a>			



10. Select "Exemptions" for previously entered child.
  - a. Click on "Exemption Type" to enter the grade range.
  - b. Choose "exemption reason".
  - c. Select the vaccines that apply to the exemption. **Must click all that apply.**
  - d. Click "save".

**Immunization Exemption Introduction**

Schools require that immunizations are current for attending students. Follow the steps below to decide if you wish to immunize your child or have your child be exempt.

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**Selecting exemptions for: Jonny Doe**


Exemption Type

Exemption Reason

Exemptions

11. Click "Download" to view and print the Vaccination Exemption Form.

**Exemption Forms**

Contact Information	Exemptions	Edit	Download
<p>(Main User) <a href="#">Edit</a></p> <p>123 ABC St., Salt Lake City UT 12345</p> <p><input type="button" value="New Exemption"/></p>	No exemptions selected		
<p>Jonny Doe <a href="#">Edit</a></p> <p>123 ABC St., Salt Lake City UT 12345</p> <p><input type="button" value="New Exemption"/></p> <p><input type="button" value="Add Child"/></p>	Grade K-6	<input type="button" value="Edit"/>	<input type="button" value="Download"/> <input type="button" value="Delete"/>

12. Give the Exemption Form to the school your child attends.

**VACCINATION EXEMPTION FORM**

Parent/Guardian Name: \_\_\_\_\_ has completed the online vaccination education module as allowed by Section 53G-9-303 of the Utah Statutory Code.

Child Name: Jonny Doe


Child Date of Birth: July 01, 2010 Date Completed: August 31, 2023

Grade Level:

Early Childhood  Grade K-6  Grade 7-12

Exemption Reason:

<input checked="" type="checkbox"/> Personal	<input type="checkbox"/> DTP/DTaP/DT/Tdap/Td	<input type="checkbox"/> MMR	<input type="checkbox"/> HEP-A
<input type="checkbox"/> Medical	<input type="checkbox"/> HIB	<input type="checkbox"/> HEP-B	<input type="checkbox"/> PNEUMO PCV
<input type="checkbox"/> Religious	<input checked="" type="checkbox"/> POLIO	<input type="checkbox"/> CHICKENPOX	<input type="checkbox"/> MEN ACWY



Printed on August 31, 2023