

Please Note: Texas A&M University neither encourages nor discourages students regarding bacterial meningitis vaccination.

The future student 18 or older, the parent of future student, or legal guardian can download and print on the blank immunization exemption affidavit by following these steps below.

Start by downloading and printing the form. [Blank Affidavit Exemption from School or Child-Care Immunizations for Reasons of Conscience form](#). Effective September 1, 2025, this is the sole acceptable form of documentation for this exemption, and the outlined process must be followed in its entirety.

Important: Do not modify affidavits in any way before submitting them to the school.

Section A, make sure to legibly and clearly print in blue or black ink the student's full legal name and correct date of birth.

AFFIDAVIT			 TEXAS Health and Human Services Texas Department of State Health Services
Exemption From School or Child-Care Immunizations for Reasons of Conscience			

This notarized affidavit must be submitted to request an exemption from state-required immunizations to attend at Texas child-care facility, elementary or secondary school, or institution of higher education, including students enrolled in health-related and veterinary courses. This affidavit is only valid for the individual named in section A and is only for submission to Texas schools and child-care facilities. This affidavit is valid for two years from the date of notarization. Additions or changes to this affidavit are not valid.

(A) Individual's Full Name

<u>Future</u>	<u>Aggie</u>	<u>Student</u>
First	Middle	Last
01/01/2008		
Date of Birth		
(mm/dd/yyyy)		

Important: Section B-D must be filled out and completed in front of a notary.

Section B: check the boxes for all vaccines the student is requesting an exemption from for reasons of conscience.

PLEASE COMPLETE THE FOLLOWING SECTION

(B) I do **NOT** want my child/self to receive the following vaccine(s) I have marked, for reasons of conscience or religious belief.

- | | |
|---|--|
| <input type="checkbox"/> Diphtheria, tetanus, and pertussis (DTaP/DT)
<input type="checkbox"/> Hepatitis A
<input type="checkbox"/> Measles, mumps, and rubella (MMR)
<input type="checkbox"/> Pneumococcal (PCV)
<input type="checkbox"/> Tetanus, diphtheria, and pertussis (Td/Tdap)
<input type="checkbox"/> <i>Haemophilus influenza</i> type b (Hib) | <input type="checkbox"/> Hepatitis B
<div style="border: 2px solid green; padding: 2px;"><input checked="" type="checkbox"/> Meningococcal (MenACWY/MCV4*)</div> <input type="checkbox"/> Rabies
<input type="checkbox"/> Polio (IPV)
<input type="checkbox"/> Varicella (chickenpox) |
|---|--|

*MCV4 is required for grade 7 through 12. MenB or MCV5 may be used for college requirements for a bacterial meningitis vaccination dose or booster.

Section C: verifies the student has read and understands the Benefits and Risks of Vaccination included with the Affidavit.

(C) I have read and understand the *Benefits and Risks of Vaccination* information sheet. I understand the individual named in Section A may be excluded from school attendance in times of emergency or epidemic declared by the Commissioner of Public Health or as allowable by 25 Texas Administrative Code, [Sec. 97.7](#).

If the student is 18 or older, they must sign and date Section D in front of a notary. If the student is under 18, a parent or legal guardian may do so instead.

(D) I certify that I am the parent / legal guardian of the above-named child, or I am signing for myself as an adult student, and that the information provided here is true and correct.

Future Aggie Student
Signature of Parent or Legal Guardian/Self if an adult

09/21/2025
Date

The notary will complete the rest of Section D, sign and date it, and place their seal. The student's name must appear on this section twice.

State of Texas

County of Brazos

BEFORE ME, Student's Name must match part A
on this day personally appeared Student's name, known to me (or proved to me through description of identity card or other document) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this 21 day of September 20 25.

Affix seal

NOTARY PUBLIC

Texas Department of State Health Services
Immunization Section
Stock # F11-11755 Rev. 8/2025

Dates must
match

Before leaving the notary, double-check the following:

- Both dates in Section D match
- The student's name is the same in Sections A and D
- At a minimum the Meningococcal Vaccine box is checked

Once the document is notarized, it must be received within 90 days by the Office of Admissions. The Affidavit can be submitted by one of the following methods:

- Uploaded through Med+Proctor <https://www.medproctor.com/>
- Uploaded through the student's AIS Portal (<https://applicant.tamu.edu/>)
- Mailed: Texas A&M University, Admissions Processing, P.O. Box 30014, College Station, TX 77842- 3014
- Hand delivered: General Services Complex, Admissions Processing, 750 Agronomy Rd., Suite 1601

It is highly recommended the student submits their Affidavit as soon as possible once they have registered for an NSC. It is in the student's best interest not to wait until their NSC to provide the Affidavit. If the Bacterial Meningitis requirement has not been cleared in Howdy or AIS, the student should bring a blank copy of the document along with the completed and notarized Affidavit in case there are issues with the notarized document. Texas A&M University neither encourages nor discourages students from electing to decline or receive immunization against meningitis. See Important Information About Meningitis at: [Meningitis Vaccination Requirement | Admissions - Admissions](#)

How to Upload Bacterial Meningitis Affidavit to AIS

1. Go to **applicant.tamu.edu** (log in with NetID)
2. Go to **My Documents** on the AIS menu
 - Select **Upload Documents**
 - Confirm that you have read the instructions
 - Select **Add Files...**
 - Select **Bacterial Meningitis Immunization Document** from the drop-down menu
 - Add file and select **Start**

This information must be clearly visible in the uploaded image to be considered a valid Affidavit:

- Document is legible
- Full legal Name
- Date of Birth
- At a minimum the Meningococcal Vaccine box is checked
- Signature date and Notary date in part D must match
- Notary seal is in date
- Notary signature