Meningitis Immunization Request for Extension Form

This form is for students who did not receive the meningitis vaccination by the compliance date (listed on the Immunization Page) due to one or more of the circumstances listed below and wish to be considered for an extension.

Under justifiable circumstances, an administrative official of the institution of higher education may grant extensions to individual students to extend the compliance date to no more than 10 days after the first day of the semester.

Please select your circumstance from the list below:

☐ I submitted my application for admission after the compliance date.

☐ I was unable to receive the vaccination due to difficulty obtaining and/or paying for it by the compliance date.

☐ I am in the process of obtaining an exemption from my physician or a notarized affidavit form that I decline the vaccination for bacterial meningitis for reasons of conscience, including a religious belief issued by The Texas Department of State Health Services.

☐ Other (explain):

______________________________________________________________

To request this extension, students must complete this form, attach the immunization record, physician exemption, or original notarized affidavit form and return it to UHCL in one of the following ways:

In person at UHCL:
Student Enrollment Center
(SEC) SSCB 1.102
2700 Bay Area Blvd
Houston, TX 77058

In person at Pearland:
Office of Enrollment Services
A128
1200 Pearland Parkway
Pearland, TX 77581

By Fax:
Office of Academic Records 281-226-7230

Extensions can take 2 to 3 business days to process. Once a decision is made, you will be contacted via your UHCL email address.

__________________________  _____________________________  __________________________
Student ID#                  Last Name                        First Name                        MI

__________________________  ___________________________
Student Signature           Date

To Be Completed by Academic Records

Application for Admission date: __________
Sent for Approval date: _______________
Approval Completed date: ______________
Student Emailed: Y   N   date __________