



**Bacterial Meningitis  
Online Enrollment Only Exemption Request**

Return form to:

The University of Texas at Dallas  
Office of the Registrar  
800 W. Campbell Rd., SSB 13  
Richardson, Texas 75080

The University of Texas at Dallas requires that all new and returning students under the age of 30 show proof of completed vaccination against Bacterial Meningitis.

By signing this letter, you are stating that you have no intention of physically accessing UT Dallas property and will remain in an online program for the duration of your time with the University. You are also stating that if there are any changes to your status that you will adhere to the necessary requirements set by the state and complete the required vaccination.

I, \_\_\_\_\_, am enrolled only in online courses with the University of Texas at Dallas. I will not physically access UT Dallas property. If there are any changes that require that I come to campus, I will complete the necessary vaccination requirements and submit all documents to the Office of the Registrar 10 days before the first day of class.

Student name (print) \_\_\_\_\_ UTD ID: \_\_\_\_\_

Current Program: \_\_\_\_\_ Expected graduation term: \_\_\_\_\_

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_