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# EAST TENNESSEE STATE UNIVERSITY

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## **One Semester Waiver of Full-Time Restriction**

(This form is **ONLY** valid your initial term at ETSU and can **ONLY** be used once.)

I understand that my State of Tennessee Immunization Requirements are not complete. I certify I am a new first time student and have received the first dose of Varicella (chicken pox) and MMR (measles, mumps and rubella) and will provide proof of the second immunization(s) prior to registration for \_\_\_\_\_ **term**.

I will provide medical documentation of the second immunization(s) to the Student/University Health Services (Nicks Hall/Room 160) or fax to (423) 439-4560 prior to my NEXT SEMESTER REGISTRATION. Failure to do this will prevent full-time enrollment. Full-time enrollment means 12 hours or more for undergraduate and 9 hours or more for graduate students.

To request this exemption, such students must send signed and completed form to the Registration Office (Burgin Dossett Hall/Room 102) or fax to (423) 439-6604.

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**Student Name (printed)**

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**Student Signature**

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**E#**

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**Date**