



POLICY AND PROCEDURE

TITLE:	Immunization
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POLICY STATEMENT:

The purpose of this policy is to establish university-wide requirements regarding immunizations for students. All students must meet the requirements as established by this policy.

PROCEDURE DETAILS:

Each student attending Goodwin University (the "University") whether fully online, in a hybrid format or on-ground must have up-to-date and adequate immunizations as required by law. Exemptions from this policy are detailed in the *Exemptions* section of this policy.

As required by Connecticut state law, the following immunizations are required:

For all students born after December 31, 1956:

Measles, 2 doses

Rubella, 2 doses

Mumps, 2 doses

For all students born on or after January 1, 1980:

Varicella, 2 doses

Each student must provide proof of immunization records to the office of the registrar as part of the application process. Proof of immunization must include documentation from a medical provider's office showing the dates of immunization for each required immunization as stated above. Alternatively, you may use the immunization form in the appendix of this policy, and have it signed by a medical physician or advanced practice registered nurse (APRN) verifying the information.

If you are requesting exemption from these requirements, per the *Exemptions* section of this policy, you will need to fill out the *Immunizations Exemption Form* which is included in the appendix section of this policy.

For more information regarding Connecticut's requirements and the laws on immunization (Connecticut General Statutes §§ 10a-155 and 10a-155(b)), please follow this [link](#) or call: (860) 509-7929.

PUBLISH POLICY STATEMENT (CLICK ON BOX NEXT TO OPTION-SELECT ALL THAT APPLY):

☒ UNIVERSITY CATALOG

☐ STAFF HANDBOOK

☐ FACULTY HANDBOOK

☒ STUDENT HANDBOOK

EXEMPTIONS:

A student will be exempt from providing proof of immunization if the student:

- a. Can provide documentation from a medical physician or APRN that such immunization is medically contraindicated
- b. Can provide medical documentation from a medical physician, APRN or the director of health of the student's current or former town of residence indicating that the student had a confirmed case of the respective disease

Students who would like to claim exemption from providing proof of immunization are required to submit the Request for Medical Exemption From Immunization/s Form during the Admissions Application process.

Students may also choose to have a titer test done if they believe they are immune to measles, rubella, mumps and varicella and are unable to access the medical records indicated under option (b). Students will need to provide medical documentation of a titer test. If the titer test comes back either negative or equivocal, the student will be required to provide proof of the required vaccine.

Students that have filed for an exemption to this policy will not be allowed on campus in the event of an outbreak for the duration of the outbreak for a disease that the student is not immunized for as required by law and indicated in the student's records.

If a student is exposed to a disease for which the student is not immunized as required by law and indicated in the student's records, the student must notify the University and will not be allowed on campus until it has been determined that it is medically safe for the student and the University community.

Please note that even when a student is exempt from the University's immunization requirement, certain programs may require vaccinations for a student to be eligible to work in the field. If this is the case, a student will not be eligible for an exemption under any circumstances and the student may also be required to have additional vaccinations. For more information, please speak with your respective program director.

OFFICES DIRECTLY AFFECTED BY THE POLICY:

Office of the Provost, Registrar, Office of Institutional Effectiveness

HISTORY:

Created October 2020

Approved November 2020

Revised July 2025

EFFECTIVE DATE:	November 2020
RESPONSIBLE OFFICE (ONLY ONE):	Registrar's Office
REVIEW DATE:	Yearly

APPENDIX:

Appendix A – Immunization Form

Appendix B – Immunization Exemption Form