OFFICE SYMBOL (600-20f)

MEMORANDUM FOR RECORD

SUBJECT: Request for Religious Accommodation for Exemption from Immunizations – Rank (if applicable) Name, Unit (if applicable)

1. [Requestor’s name] has requested a religious accommodations exemption from immunizations. In accordance with AR 600-20, chapter 5-6, [requestor’s name] must be counseled by a military physician prior to consideration for exemption.

2. I personally counseled [Requestor’s name] in clinic on [insert date]. We discussed [list the discussion—examples: specific vaccine information, including benefits and risks, and potential risks of infection incurred by unimmunized individuals] and I discussed the potential impacts of this course of action.

3. Unless granted a waiver through the Office of the Surgeon General, the patient would be non-deployable.

The point of contact for this memorandum is the undersigned at xxx-xxx-xxxx or xxx.xx.mil@mail.mil.

Encls JOHN D. DOE, MD

as MC, USA

Unit Physician