

**PERMANENT NON-COMPLIANCE WAIVER  
RUBEOLA**

1. Measles (rubeola) is often a severe disease, frequently complicated by middle ear infection or bronchopneumonia. Encephalitis occurs in approximately one of every 1,000 reported cases; survivors of this complication often have permanent brain damage and mental retardation. Death, usually from respiratory and neurologic causes, occurs in one of every 1,000 reported measles cases. The risk of death is greater for infants and adults than for children and adolescents.
2. I understand that by waiving the rubeola pre-enrollment health requirement or by not providing proof of my immune status to rubeola (measles), either by a rubeola titer or proof of two doses of rubeola vaccine, I may be subject to exclusion from the UNO campus until at least two weeks after the onset of rash in the last case of measles.
3. I further understand the Centers for Disease Control considers a measles outbreak to be one case of confirmed measles.

I request to be exempt from the required immunization on the basis of personal beliefs, in accordance with the provisions of Revised Statutes of Nebraska.

Name (please print) \_\_\_\_\_

Student ID # \_\_\_\_\_

Date of Birth \_\_\_\_\_

\_\_\_\_\_  
*(Signature of requesting student)*

This affidavit was signed before me on \_\_\_\_\_ (date)

Notary Public for the State of Nebraska

My Commission expires \_\_\_\_\_