



**AFFIRMATION FOR THOSE
SEEKING REMOTE
EXEMPTION FOR SPRING 2023
FROM REQUIRED
COVID-19 VACCINATION**

AFFIDAVIT of AFFIRMATION – An affidavit is a written statement of truth, voluntarily made by the person (student) where the student affirms (promises) to tell the truth when giving information and promises to follow a set list of guidelines and actions set forth to maintain these affirmations.

I am a student of the State University of New York at Old Westbury (“Old Westbury”) and am aware of the fact that the COVID-19 virus and variants has caused sickness, up to, and including death, to many people in my country and worldwide. I am completing this information willingly to exercise my right of choice while acknowledging my personal responsibility to others in the Old Westbury campus community. While I am NOT vaccinated for COVID-19, or I have chosen not to disclose my vaccination status, I affirm that:

1. I am the person named below who attends Old Westbury.
2. I understand that all Old Westbury students who access campus facilities in person are to be fully vaccinated before the start of the Spring 2023 semester for which I am registered, with limited exceptions.
3. I am only attending on-line classes. I do not have any in-person classes scheduled, nor will I.
4. I do not reside, and will not visit any residential buildings in either the Woodlands or Academic Village residence hall communities for any reason at all.
5. My signature below indicates that I am requesting an exemption from this requirement beginning on the date this form is signed, and that I attest I will not have a physical presence at any SUNY Old Westbury owned facilities, including for the purpose of using on-campus services, for the duration of the Spring 2023 semester.

- 6 I am not entering the SUNY Old Westbury campus property in Nassau County, New York, for any purpose whatsoever during **Spring 2023**. I further understand that any services that I may want to pursue will only be able to be done to the degree I can do this by electronic means.
7. I understand and accept that I will not be able to access physically on campus services offered, including but not limited to educational or social events, health services, the Campus Library, tutoring or career services, advising, campus athletic events and facilities, student and academic support offices. I further understand that I am not eligible for any refund of mandatory fees as I will be still able to use the services electronically and I made the decision regarding my COVID-19 vaccine.
- 8 Furthermore, I attest that if I must have an in-person presence at any Old Westbury facility after signing this form, that I will submit proof of COVID-19 vaccination to the College's Student Health Center, and receive confirmation of the validation of my vaccine information via campus email, prior to my arrival.
- 9 I will contact the associated department or office with questions of how they will be able to meet my needs in lieu of my choice to exclude myself from on-campus activities.

Printed Name: _____

Signature: _____ Date: _____

Return signed attestations via email to covid19-remote@oldwestbury.edu