

AFFIDAVIT OF RELIGIOUS EXEMPTION

STATE OF TEXAS

COUNTY OF _____

BEFORE me, the undersigned authority, on this day personally appeared

_____, who, after being duly sworn, deposes and says:
(Parent or Guardian)

“I understand that Texas law requires all public and private schools to screen children in grades 6 and 9 for abnormal spinal curvature before the end of the school year, and that schools may also choose to conduct their spinal screening programs in grades 5 and 8.

I hereby request that _____, NOT undergo
(Name of Student)

spinal screening because it conflicts with tenets and practices related to our religious affiliation.

(Parent or Guardian)

Sworn and subscribed before me by the said _____ on this
the _____ day of _____, _____.

(Notary Public in and for the State of Texas)