

Admissions & Records

College of the Siskiyous, 800 College Ave., Weed, CA 96094
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Petition for a Health Fee Waiver Based on Faith Healing
AP 5030

Education Code Section 76355 provides for certain exemptions from health fees based on specific criteria. (See below for citation of Code.)

Please type your name and check the box that applies to you.

I, _____, Student ID Number _____
hereby certify and declare the following:

- I depend exclusively upon prayer for healing when I am ill or when I have an emergency in accordance with the teachings of:

(Name of religious sect, denomination or organization: _____)

OR

- I depend upon prayer, doctors and/or medical facilities for healing when I am ill or when I have a medical emergency.

I understand that providing false information in this certification is a violation of the Student Code of Conduct, as defined in Board of Trustees Policy AP 5500 and that said violation may result in disciplinary action up to and including dismissal.

Student Signature: _____ **Date:** _____

To Be Completed By Religious Organizations Only

The above-named student is applying for an exemption of health fees. Please certify below in accordance with the following educational code:

California Education Code, Section 76355 (c)

The governing board of a district maintaining a community college shall adopt rules and regulations that exempt the following students from the health fee (a):

- 1. Students who depend exclusively upon prayer for healing in accordance with the teaching of a bonafide religious sect, denomination, or organization.*

I certify that the members of (Name of Religious Organization): _____
are taught to exclusively depend upon prayer for healing and without the use of doctors or medical offices.

Name of Official (Print): _____ **Phone:** _____

Signature of Official: _____ **Date:** _____