



Universiti Tunku Abdul Rahman (UTAR) COVID-19 Vaccination Self-Declaration Form

As a responsible University, UTAR exercises care and takes measures to ensure a healthy and safe place for UTAR staff members and students. We strongly encourage all eligible individuals to get vaccinated.

In the event that you do not intend to register for COVID-19 vaccination or you are deemed not suitable to receive COVID-19 vaccination, you are required to fill in this self-declaration form. The University requires you to provide honest feedback regarding your vaccination status, so as to assist the University to minimise your exposure to the infectious virus while carrying out your work duties, research and other activities.

Your cooperation is highly appreciated to help the University in the management of COVID-19.

(A) Personal Details

Full Name (*as per NRIC/Passport*):

NRIC/Passport No:

Nationality:

Student ID:

Faculty & Programme:

MySejahtera ID:

Permanent Address:

Current Address:	
Mobile No:	E-mail:
[Redacted]	

(B) Self-declaration on COVID-19 Vaccination Status

[Note: Please tick (✓) and provide detailed information accordingly]

I have **not been fully vaccinated / not registered for vaccination due to medical reasons.*
(* Please circle as appropriate.)

Details of your medical condition:

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[Note: Please attach medical report/supporting evidences]

I have not registered for vaccination due to non-medical reasons.

Reason:

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Justification of your reason:

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(C) Acknowledgement

1. I understand that the University strongly encourages all eligible students to get vaccinated against COVID-19.
2. Based on my declaration status, I understand that the University may arrange for a briefing session and/or a session with me for discussion on COVID-19 vaccination.
3. I acknowledge that, while the University may encourage me to get vaccinated, it is my own personal choice on making decisions for vaccination.
4. I acknowledge that by declining to get vaccinated, I continue to be at risk and may be excluded from entering the University campuses. I understand that only fully vaccinated individuals are allowed to enter University campuses as directed by MOHE.

By signing this declaration form, I hereby agree that the University may collect, obtain, store and process the personal data that I have provided in this form for the purpose as deemed necessary by the Management of the University. I hereby give my consent to UTAR to:

- store and process my personal data; and
- disclose my personal data to the relevant government authorities/agencies or third parties where required by the law or for legal and health and safety purposes.

In connection with the purposes specified above, UTAR is permitted to disclose such personal data to the relevant authorities and/or medical professional and/or for internal use, who may undertake certain administrative, operational functions and any activity related thereto for or on behalf of the University.

I certify that all personal data (including sensitive personal data, vaccination status and health conditions) that I have provided are all true, up-to-date and accurate. Should there be any changes to any of my personal data, I shall notify the University immediately.

Signature:	
Name (as per NRIC/Passport):	
Date:	