

South Australian Public Health Act 2011 Part 12A  
Immunisation and Early Childhood Services

# Exemption Application Form

I, .....,

Parent / Legal Guardian / early childhood service provider of

Name: ..... Date of Birth: .....

Address: ..... Postcode: .....

Email: ..... Mobile: .....

request an exemption under the *South Australian Public Health Act 2011 - Part 12A Immunisation and Early Childhood Services*, Section 96E — Exemptions clause based on the following:

Reason for request of an exemption:

- Need to seek further information and discuss my situation with a specialist
- Require an exemption as I will not be vaccinating my child
- ECS\* provider that is not eligible to receive the ACCS# (child wellbeing) and have an at risk/vulnerable child attending our service
- Other

Information to support my application:

*(Attach supporting documentation to the email as numbered Attachments)*

\*Early childhood service (ECS); #Additional child care subsidy (ACCS)

Email completed form to [Health.CPHOImmunisationexEmption@sa.gov.au](mailto:Health.CPHOImmunisationexEmption@sa.gov.au).

An exemption request must be for reasons not listed on the [Commonwealth Government's Department of Social Services Approved Immunisation Exemptions](#) as applied through the Commonwealth Governments legislation, *A New Tax System (Family Assistance) Act 1999*.

Exemptions may be subject to conditions as the Chief Public Health Officer thinks fit, and for a specified period and vary according to the circumstances for which it applies.

Name: .....

Signature: ..... Date: .....

## For more information

Immunisation Section  
Communicable Disease Control Branch  
[sahealth.sa.gov.au/immunisation](http://sahealth.sa.gov.au/immunisation)

**OFFICIAL: Sensitive//Medical in confidence (when completed)**

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SA Health