I. Reason for requesting a temporary enrollment hold lift for the COVID-19 vaccine requirement (select option A or B and complete all fields within section A or B):

A: International students

☐ I am an international student living in a country with limited or no access to WHO-approved COVID-19 vaccines, and will not have time to complete a WHO-approved vaccine series before the start of the semester once I arrive in the United States.

I understand that I am still required to meet the University of California’s COVID-19 vaccination requirements, and agree to complete a WHO-approved vaccine series as soon as possible upon my arrival to the United States.

Country of residence: ______________________

Anticipated date of arrival to the United States: _____________________

B: Students in the process of completing a vaccine series

☐ I have received the first dose of a multi-dose COVID-19 vaccine series, and need to wait the requisite amount of time in between doses.

I understand that I am still required to meet the University of California’s COVID-19 vaccination requirement (completion of a full series of a WHO-approved COVID-19 vaccine series), and agree to receive the remaining doses at the appropriate time interval.

Date of first vaccine: ________________    Vaccine type/brand: ____________________

II. Attestation and signature

☐ I attest that the above information is correct to the best of my knowledge. I understand that I may face disciplinary action if I am found to have violated the Berkeley Campus Code of Student Conduct (see Section V, Grounds for Discipline).

Student signature: ____________________________    Date: _________________