



Remote Learning Attestation Form

Student Information

Last:	First:	Middle:
Student ID#:	Birth date:	
Phone:	Email:	

Attestation

I, _____ attest that I am registered as a remote learning student
Student's Name

during the _____ semester. Due to the fact that I am not in compliance with the immunization
Semester (season + year)

requirements of the Fashion Institute of Technology (FIT), I will not visit the FIT campus under any circumstances during the
aforementioned semester. This includes labs, library, counseling, gym, cafeteria, and any other campus facilities.

Student's Signature:	Date:
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Ways to submit this form:

- Scan and upload to the FIT Health Portal at fit.studenthealthportal.com.
 - Email to fithealthservices@fitnyc.edu
 - Fax to 212 217.4191
- Mail or drop off at FIT Health Services at 227 W 27th St, Room A402, New York, NY 10001-5992.

If you have any questions, call Health Services at 212 217.4190.