[Student Name, course enrolled in]

[Street Address]

[City, Province, Postal Code]

[Email Address]

[Today’s Date]

[Name of Post-Secondary Institute]

[Street Address]

[City, Province, Postal Code]

Dear [name of administrator or admissions officer]:

I am a [year of study] year student at [Name of Post-Secondary Institute] in the [program/department/faculty]. I have worked hard to meet the requirements for admission to the [name of program] program, and was pleased to accept the opportunity to attend this program made by the [Name of Post-Secondary Institute]. I paid the required fees and complied with other requirements for my attendance, which sealed the contractual agreement as between the [Name of Post-Secondary Institute], and myself.

Within the bounds of that contractual agreement, actual or implied, I did not agree to participate in an experimental medical procedure while attending [Name of Post-Secondary Institute]. As such, if I am required to withdraw from one or more terms of study due to declining to receive the Covid-19 experimental vaccinations, I will consider this a breach to the contractual agreement as between the [Name of Post-Secondary Institute], and myself.

I have sought legal advice, and have been advised that if I am unable to continue my course of studies or that my studies are delayed, I am entitled to sue for damages arising from the [Name of Post-Secondary Institute]’s unilateral breach of this agreement. Such damages include, but are not limited to refund of fees and other charges, costs of relocation and additional living costs should I be forced to relocate to complete my education elsewhere, and/or lost income that I would have received in my new career for the duration of the delay in my studies.

I do not want to interrupt my studies at [Name of Post-Secondary Institute]. I have invested hard work, time and money to study for my future career.

[Name of Post-Secondary Institute] has a duty to accommodate students who, for whatever reason, refuse to be injected with an experimental gene therapy.

This duty to accommodate may take any of the following forms:

1. Provide me with the opportunity to complete my education entirely online, including examinations. For some courses of study, this will not be an option.
2. Provide me with an exemption based upon my right to bodily autonomy and the fact that being coerced into participating in a medical experiment is illegal under the Crimes Against Humanity and War Crimes Act (the Nuremburg Code), the [Name of Province] Human Rights Act, the Canadian Charter of Rights and Freedoms, the Canadian Bill of Rights, and the Criminal Code of Canada. Contravention of these Acts can carry severe legal penalties, and as was determined many years ago in the Nuremburg Trials the claim that [Name of Post-Secondary Institute] was just following the orders of the government is not a valid defence.
3. Provide me with written assurance that [Name of Post-Secondary Institute] is prepared to compensate me for any costs that this unilateral breach of contract may incur to myself in order to complete my education, either in the form of recompense for relocation and re-enrollment costs at another institution, or in the form of recompense of lost income should my education be delayed until such time as [Name of Post-Secondary Institute] rescinds this policy.

In addition, [Name of Post-Secondary Institute] should be made aware that there is an increasing volume of data showing a high risk of severe adverse reactions to these vaccinations, including but not limited to myocarditis which results in permanent damage to the heart, strokes, paralysis and auto-immune disorders such as type 1 diabetes, arthritis, lupus, colitis, Alzheimer’s Disease, Parkinson’s Disease, Multiple Sclerosis and many others. There have also been many deaths resulting from these injections, as is shown by the Canadian Adverse Events Following Immunization Surveillance System (CAEFISS), the Vaccine Adverse Event Reporting System (VAERS) in the U.S., and EudraVigilance, the European database of adverse immunization reactions. In addition, I have been made aware that the odds of a severe adverse reaction increase with decreasing age of the subject, which places me at additional risk.

Should I as a student at [Name of Post-Secondary Institute] suffer any of these severe reactions, I have also been advised by my legal counsel that [Name of Post-Secondary Institute] could well be held liable for damages as it would be my statement that I only submitted to the vaccine because it was mandated by [Name of Post-Secondary Institute] as a condition of my continued attendance.

I await your timely response. You will find my contact information at the top of the first page.

[Name of Student],

[Faculty or Program]