ITASCA COMMUNITY COLLEGE IMMUNIZATION RECORD

For Students Attending Post-Secondary Schools

Students born prior to 1957 and students who graduated in 1997 or thereafter from a Minnesota high school do not need to provide immunization records. All other students must provide documentation of immunization against these vaccine preventable diseases: measles, rubella, mumps, diphtheria, and tetanus.

Please complete this immunization form and submit with your application to Itasca.

Name _.	Last	First	MI	Soc.Sec.#_			
Birthda	te	//					
Enter the month, day (if available), and year of the most recent "booster" for diphtheria and tetanus (must be within the last 10 years) and for all doses of vaccine for measles, mumps, and rubella that were given after 12 months of age. Month/Day/Year Month/Day/Year							
	Diphtheria & T	etanus (Td)					
	Measles (rube	ola, red measles)					
	Rubella (Germ	an measles)					
For the student: I certify that the above information is a true and accurate statement of the dates on which I received the immunizations required by Minnesota law.							
Student's signature:					Date:		
Students wishing to file an exemption to any or all of the required immunizations must complete the following:							
Medical exemption: The student named above does not have one or more of the required immunizations because he/she has (check all that apply):							
A medical problem that precludes the vaccine(s Not been immunized because of a history of disease. Laboratory evidence of immunity against						vaccine(s). disease.	
Physician's signature Date							
I hereb Is cont	rary to my consc	rization that immunization cientiously held beliefs.					
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		before the off the			, 2	· · · · · · · · · · · · · · · · · · ·	