

LaGuardia Community College Health Center Immunization Form

For information regarding FR	EE immunization provided by the New Y	ork State Health Dep	partment, please call (2	212) 349-2664
Name	Social Security #			
Address				
Phone	Birth Date/		Sex □Male	☐ Female
Parent/Guardian Name	Phone			
Address				
Dear Student : State Law requires that College stude against Measles, Mumps and Rubella		y 1 1957 must p	resent proof of i	mmunity
MEASLES Two doses of live measles vaccine administered on or after January 1, 1968 and 12 months of age, second dose to be administered at least 28 days after the first dose, or physician documentation of measles disease, or a blood test showing immunity to disease.	MUMPS One dose of live mumps vaccine administered after 12 months of age and on or after January 1, 1969, or physician documentation of mumps disease, or a blood test showing immunity to disease.		RUBELLA One dose of live rubella vaccine administered after 12 months of age on or after January 1, 1969, or a blood test showing immunity to disease. Note: a history of having had rubella is not acceptable proof of immunity.	
Exemptions:	cations by a physician.		ficate or driver's li	cense.
Please have your doctor/clinic fill out all registration. Failure to comply with this may affect financial aid. Immunization registration date.	request will block your registration	on and/or make y	ou ineligible to att	end class and
A physician or licensed health care practine measles, mumps and a positive rub			nedically documen	ted history of
VACCINATION REQ	UIREMENTS	MEASLES	MUMPS	RUBELLA
First dose given on or after 1/1/68 and				
First dose given on or after 1/1/69 and Second dose given on or after 15 mon				
Date and history of disease	illis of age			
Copy of laboratory report blood test wi	th levels and date			
I certify that the above named stude laboratory evidence of immunity as		munizations or	has a clinical his	story or
Physician signature/stamp required	Date:			
Address:				
Address:City, State, ZIP:	Phone #:			

Return form to: LaGuardia Community College Health Center, Main Building, Room MB40 31-10 Thomson Ave. L.I.C., NY 11101 Telephone (718) 482-5280 Fax (718) 609-9016