

IMMUNIZATION RECORD

New York State Public Health Law 2165 now requires post-secondary students to show they have been inoculated against Measles, Mumps, and Rubella (MMR). Persons born on or after January 1, 1957 are required to present proof of immunity from all three as presented below.

Name (Last, First, MI) _____ Birth date (m/d/yr): _____

Address: _____ Soc. Sec. #: _____ - _____ - _____

City: _____ State: _____ Zip: _____

Starting Semester: Spring Summer Fall 200____ Degree: _____

Required: Measles (Rubella) Immunity - Must have one of the following:

1. Two dates of Measles Immunization: (1) _____ (2) _____

Both must have been given after 1967 AND on or after first birthday.

2. Date of Measles Titer: _____ Immune: Yes _____ No _____

3. Date physician diagnosed measles disease: _____ AND

Signature of the diagnosing physician: _____

M

Required: Mumps Immunity - Must have one of the following:

1. Date of at least one Mumps Immunization: (1) _____ (2) _____

Must have been given on or after first birthday.

2. Date of Mumps Titer: _____ Immune: Yes _____ No _____

3. Date physician diagnosed mumps disease: _____ AND

Signature of the diagnosing physician: _____

M

Required: Rubella (German Measles) Immunity - Must have one of the following:

1. Date of at least one Rubella Immunization: (1) _____ (2) _____

Must have been given on or after first birthday.

2. Date of Rubella Titer: _____ Immune: Yes _____ No _____

3. Date physician diagnosed Rubella disease: _____ AND

Signature of the diagnosing physician: _____

R

Signature of Health Practitioner _____ Practitioner Stamp/Seal: _____

Address: _____ Date: _____

City: _____ State: _____ Zip: _____ Telephone: _____