

MARIA

COLLEGE

NOTE: Public Health Law 2165 now requires post-secondary students to show protection against measles, mumps, and rubella. Persons born prior to January 1, 1957 are exempt from this requirement.

Upload this completed form to the electronic health record database as directed by your program

Last name First name

Address City State Zip

Date of Birth Academic Program Day
 Evening
 Weekend

A. PLEASE NOTE: MMR vaccine is recommended to provide increased protection against all three vaccine-preventable diseases: measles, mumps and rubella.

Dates MMR doses administered: 1st _____ 2nd _____

IF TWO DOSES OF MMR NOT GIVEN, HEALTH PRACTITIONER MUST COMPLETE SECTIONS B, C, AND D.

B. REQUIRED: Measles (Rubeola) Immunity must have one of the following:

1. Two dates of Measles Immunizations: (1) _____ (2) _____
Both must be given after 1967 AND the first after the first birthday and the second on or after 15 month of age.

Or

2. Date of Measles Titer: _____ Immune Yes No

Or

3. Date of physician diagnosed Measles disease _____

AND signature of diagnosing physician _____

C. REQUIRED: Rubella (German Measles) Immunity – Must have one of the following:

1. Date of at least one Rubella immunization: (1) _____ (2) _____
(Must be on or after the first birthday)

2. Date of Rubella Titer: _____ Immune Yes No
(Physician diagnosis of Rubella is not acceptable)

D. REQUIRED: Mumps Immunity – Must have one of the following:

1. Date of at least one Mumps immunization: (1) _____ (2) _____
(Must be on or after the first birthday)

Or

2. Date of Mumps Titer: _____ Immune Yes No

Or

3. Date of physician diagnosed Mumps disease _____

AND signature of diagnosing physician _____

Signature of Doctor License #

Printed Name of Doctor Date