



STUDENT IMMUNIZATION RECORD FORM

IMMUNIZATION INFORMATION MUST BE RECEIVED IN THE ADMISSIONS OFFICE BEFORE YOU REGISTER.

Name _____ Date of birth _____ Student ID _____

Definitions and additional information about New York State Public Health Law 2165 and 2167 are located on the reverse side.

MENINGITIS VACCINATION RESPONSE – New York State Public Health Law 2167

To be completed and signed by all students taking 6 or more credits of courses that allow in-person study such as independent study, study group or residency. Check one box only and sign below.

| | |
|--|------------|
| I have: | |
| <input type="checkbox"/> had at least one dose of meningococcal ACWY vaccine within the last five years and have provided a vaccine record attesting to this statement; or | |
| <input type="checkbox"/> been notified of the information regarding meningococcal meningitis disease and will obtain a meningococcal vaccine within 30 days and provide a vaccine record attesting to this statement; or | |
| <input type="checkbox"/> been notified of the information regarding meningococcal meningitis disease and will not obtain immunization against meningococcal disease. | |
| Signed _____ | Date _____ |

REQUIRED NEW YORK STATE IMMUNIZATIONS – New York State Public Health Law 2165

Students born after 1956 and taking 6 or more credits of courses that allow in-person study such as independent study, study group or residency, must comply. If this form is not stamped by a physician or licensed healthcare practitioner, additional proof of immunization may be requested.

| Disease | Vaccine Date Month/Day/Year* | Check if MMR | Disease History Month/Year* | Titer Date Month/Day/Year* Interpretation* |
|---|---------------------------------|--------------------|--------------------------------|--|
| Measles (Rubeola) – Two Doses Required • Dose 1 – Live measles vaccine or MMR vaccine • Dose 2 – Live measles vaccine or MMR vaccine • Physician-verified history of disease or blood test (titer) showing immunity | | | | |
| Mumps • Dose 1 – Live mumps vaccine or MMR vaccine • Physician-verified history of disease or blood test (titer) showing immunity | | | | |
| Rubella (German Measles) • Dose 1 – Live rubella vaccine or MMR vaccine • or a blood test (titer) showing immunity | | | | |
| Meningococcal Meningitis • One dose of vaccine within the last five years; or • a complete two- or three-dose series of MenB | | | | |

***Required**

Physician/nurse practitioner/PA signature _____ Date _____ Medical Office Stamp _____

Address _____ Phone (area code) _____

Return completed form to:
 Admissions
 SUNY Empire State College
 2 Union Ave., Saratoga Springs, NY 12866-4390
 fax 518-587-9759 – immunizations@esc.edu

ESC IMMUNIZATION REQUIREMENT INFORMATION

WWW.ESC.EDU/IMMUNIZATIONS

Meningococcal Meningitis

New York State PHL Section 2167 requires post-secondary institutions to distribute information about meningococcal disease and vaccination to students registered for 6 or more credits of courses that allow in-person study such as independent study, study group or residency. SUNY Empire State College is required to maintain a record of the following for each student:

- A vaccine record indicating at least one dose of meningococcal ACWY vaccine within the last five years or a complete two- or three-dose series of MenB without a response form; or
- A signed response form with a vaccine record (if a student submits a response form selecting this option, a vaccine record must be attached); or
- A signed response form indicating that the student will obtain meningococcal vaccine within 30 days; or
- A signed response form indicating that the student will not obtain immunization against meningococcal disease.

If a student has not received the meningococcal vaccine within the past five years, then he/she must submit the signed response form indicating they will obtain the vaccination within 30 days or that they decline vaccination.

Measles, Mumps and Rubella

New York State Public Health Law 2165 requires that all students born on or after Jan. 1, 1957, registered for 6 or more credits of courses that allow in-person study such as independent study, study group or residency, must submit proof of immunity to measles, mumps and rubella. **Proof of immunity consists of:**

Measles (Rubeola) – Two doses of live measles vaccine or MMR

- both must be given after 1967
- the first dose must have been administered on or after the first birthday
- the second dose at least 28 days later and after 15 months of age
- can be administered as single doses or in combination with the MMR vaccination that total two vaccinations
- physician-verified history of measles disease or a blood test (titer) showing positive results (immunity)*

Mumps – One dose of live mumps vaccine or MMR

- administered on or after the first birthday
- physician-verified history of mumps disease or a blood test (titer) showing positive results (immunity)*

Rubella (German Measles) – One dose of live rubella vaccine or MMR

- administered on or after the first birthday
- or a blood test (titer) showing immunity*

*Month, day and year are required for all vaccinations and titers. Month and year are required for disease history.

What if I do not have copies of my immunization documentation?

- Contact your physician or healthcare provider for your immunization records.
- Contact a previous U.S. high school, college or university that required immunizations for your immunization records.
- Contact your physician to obtain titer (blood) tests to determine immunity, or contact your local county or city health department to obtain vaccinations at little or no cost. Visit www.esc.edu/immunizations for more information.

Exemptions

Students registered exclusively in courses coded as online are exempt. Students meeting the immunization requirements may request **an exemption that is: typed, includes the date of request, student ID number and student signature.** **All requests are subject to approval.**

Medical Exemption – A licensed physician or nurse practitioner must provide a written statement of exemption on office letterhead, specifying which of the immunization products should not be administered and how long the medical contraindication will last.

Religious Exemption – you must provide the college with a signed statement that describes in sufficient detail that your beliefs are

- (1) religious in nature, not philosophical and
- (2) your beliefs are sincerely and genuinely held. Statements must include the name of the religious affiliation and supporting documentation from the organized affiliate.