



UNIVERSITY SYSTEM OF GEORGIA
REQUIRED
CERTIFICATE OF IMMUNIZATION
(Return this to the institution)

Return documentation to the college or university that you are applying to. Retain a copy of the completed form for your records.

STUDENT INFORMATION

Social Security Number/Student ID: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Term/Year of Application: \_\_\_\_\_ Age at time of application: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

REQUIRED IMMUNIZATION INFORMATION (See the Immunization Requirements & Recommendations for USG Students documentation)

Table with 6 columns: VACCINE, DATE MM/DD/YYYY, DATE MM/DD/YYYY, DATE MM/DD/YYYY, HISTORY, DATE OF POSITIVE LAB/SEROLOGIC EVIDENCE. Rows include MMR 1, Measles 1, Mumps 1, Rubella 1, Varicella 3, Tetanus-Diphtheria (DTP, DTaP, Tdap, or Td within 10 years), and Hepatitis B 2.

1—Not required if born before 1957. 2—Only required of students who are 18 years of age or younger at time of expected matriculation. 3—Required for all US born students born in 1980 or later; all foreign born students regardless of year born.

PERMANENT OR TEMPORARY IMMUNIZATION EXEMPTION

- ☐ This student is exempt from the above immunizations on the ground of permanent medical contraindication.
☐ This student is temporarily exempt from the above immunization until \_\_\_\_/\_\_\_\_/\_\_\_\_\_.

CERTIFICATION OF HEALTH CARE PROVIDER (This information is required)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_
Address: \_\_\_\_\_
Date of Issue: \_\_\_\_/\_\_\_\_/\_\_\_\_\_ Telephone: \_\_\_\_\_

EXEMPTIONS

Check the appropriate box, sign, and date if you are claiming exemption of the immunization requirement for one of the following reasons:
☐ I affirm that Immunization as required by the University System of Georgia is in conflict with my religious beliefs.
I understand that I am subject to exclusion in the event of an outbreak of a disease for which immunization is required.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

☐ I declare that I will be enrolling in ONLY courses offered by distance learning. I understand that if I register for a course that is offered on-campus or at a campus managed facility this exemption becomes void and I will be excluded from class until I provide proof of immunization.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

## Immunization Requirements and Recommendations for University System of Georgia Students

Proof of Immunization or Naturally-Acquired Immunity Required for Some or All Students			
Vaccine	Requirement	Required for:	Notes
<b>Measles (Rubeola)</b>	<ul style="list-style-type: none"> <li>▪ 2 doses of live measles containing vaccine (combined measles-mumps-rubella or “MMR” meets this requirement), with first dose at 12 months of age or later and second dose at least 28 days after the first dose,</li> <li><b>or</b></li> <li>▪ Laboratory/serologic evidence of immunity</li> </ul>	Students born in 1957 or later	<ol style="list-style-type: none"> <li>1) Guidelines exist for vaccination of persons with altered immunocompetence<sup>2,4</sup>.</li> <li>2) For students born before 1957, proof of immunity may be required if enrolled in health care curriculum.</li> </ol>
<b>Mumps</b>	<ul style="list-style-type: none"> <li>▪ 2 doses of live mumps containing vaccine (combined measles-mumps-rubella or “MMR” meets this requirement), with first dose at 12 months of age or later and second dose at least 28 days after the first dose,</li> <li><b>or</b></li> <li>▪ Laboratory/serologic evidence of immunity</li> </ul>	Students born in 1957 or later	<ol style="list-style-type: none"> <li>1) Guidelines exist for vaccination of persons with altered immunocompetence<sup>2,4</sup>.</li> <li>2) For students born before 1957, proof of immunity may be required if enrolled in health care curriculum.</li> </ol>
<b>Rubella (German Measles)</b>	<ul style="list-style-type: none"> <li>▪ 1 dose at 12 months of age or later (MMR meets this requirement),</li> <li><b>or</b></li> <li>▪ Laboratory/serologic evidence of immunity</li> </ul>	Students born in 1957 or later	<ol style="list-style-type: none"> <li>1) Guidelines exist for vaccination of persons with altered immunocompetence<sup>2,4</sup>.</li> <li>2) For students born before 1957, proof of immunity may be required if enrolled in health care curriculum.</li> </ol>
<b>Varicella (Chicken Pox)</b>	<ul style="list-style-type: none"> <li>▪ 2 doses spaced at least 3 months apart if both doses are given before the student’s 13<sup>th</sup> birthday</li> <li><b>or</b></li> <li>▪ 2 doses at least 4 weeks apart, if first dose given after the student’s 13<sup>th</sup> birthday;</li> <li>▪ Reliable history of varicella disease (“chicken pox”),</li> <li><b>or</b></li> <li>▪ Laboratory/serologic evidence of immunity</li> <li><b>or</b></li> <li>▪ History of herpes zoster (shingles)</li> </ul>	<p>All <u>U.S. born</u> students born during or after 1980</p> <p>All foreign born students regardless of year born</p>	<ol style="list-style-type: none"> <li>1) Guidelines exist for vaccination of persons with altered immunocompetence<sup>2,4</sup>.</li> <li>2) For students born before 1966, proof of immunity may be required if enrolled in health care curriculum.</li> </ol>
<b>Tetanus, Diphtheria</b>	<ul style="list-style-type: none"> <li>▪ One tetanus/diphtheria containing <b>booster</b> dose within 10 years prior to matriculation. Combined tetanus, diphtheria, and acellular pertussis (whooping cough) booster (Tdap) is preferred but Td is acceptable (<i>Students who are unable to document a primary series of 3 doses of tetanus/diphtheria-containing vaccine (DTaP, DTP, or Td) are <b>strongly advised</b> to complete a 3-dose primary series.</i>)</li> </ul>	All students	<ol style="list-style-type: none"> <li>1) Tetanus/diphtheria containing boosters are recommended every 10 years throughout adulthood. Adults should receive a single dose of Tdap to replace a single dose of Td. Tdap should also be given to adults who will have close contact with an infant less than 12 months of age, ideally at least one month before beginning close contact with infants.</li> </ol>
<b>Hepatitis B</b>	<ul style="list-style-type: none"> <li>▪ 3 doses hepatitis B series (0, 1-2, and 4-6 months),</li> <li><b>or</b></li> <li>▪ 3 doses combined hepatitis A and hepatitis B series (0, 1-2, and 6-12 months),</li> <li><b>or</b></li> <li>▪ 2 dose hepatitis B series of Recombivax™ (0 and 4-6 months, given at 11-15 years of age),</li> <li><b>or</b></li> <li>▪ Laboratory/serologic evidence of immunity or prior infection</li> </ul>	<p><b>Required</b> for all students who will be 18 years of age or less at matriculation</p> <p><b>It is strongly recommended</b> that all students, regardless of their age at matriculation, discuss hepatitis B immunization with their health care provider.</p>	May be required (along with recommended post-vaccine serologic testing) for students in the health sciences, regardless of age at matriculation.

Signed Documentation Stating that Student has Received the Vaccine <u>OR</u> Reviewed Information Provided As Required by House Bill 521 Required for Some Students			
Vaccine	Requirement	Required for:	Notes
<b>Meningococcal</b>	<ul style="list-style-type: none"> <li>▪ 1 dose meningococcal conjugate vaccine (<b>preferred</b>)</li> <li>-+ <b>or</b></li> <li>▪ 1 dose of meningococcal polysaccharide within 5 years prior to matriculation,</li> <li><b>or</b></li> <li>▪ Signed documentation that student (or parent or guardian if student &lt; 18 years old) has received and reviewed information about the disease as required by O.C.G.A. § 31-12-3.2</li> </ul>	Newly admitted freshmen or matriculated students <u>planning to reside in university managed campus housing</u>	<ol style="list-style-type: none"> <li>1) Effective January 2004, University System of Georgia institutions are required by O.C.G.A. §31-12-3.2 to obtain signed documentation from newly admitted freshman or matriculated students indicating that they have received the vaccine or have reviewed information about the disease. If a student is a minor, only a parent or guardian may sign such document.</li> </ol>