

ONTEORA CENTRAL SCHOOL DISTRICT

Immunization Requirements for Entering Students

New York State Public Health Law, Section 2164, mandates that schools shall not permit a child to be admitted unless the person in parental relation provides the school with a certificate of immunization or proof from a primary care provider, nurse practitioner, or physician’s assistant that the child has received or is in the process of receiving the required immunizations.

Vaccine	Kindergarten—4	Grade 5	Grade 6—10	Grades 11-12
Diphtheria, Tetanus, Pertussis (DTaP, DPT, Tdap)	4 to 5 doses*	4 to 5 doses*	3 doses*	3 doses
Tetanus, Diphtheria, Pertussis (Tdap)			1 dose†	1 dose
Polio (IPV or OPV)	3 to 5 doses*	3 doses	3 to 5 doses*	3 doses
Measles, Mumps, Rubella (MMR)	2 doses*	2 doses*	2 doses*	2 doses
Hepatitis B	3 doses*	3 doses*	3 doses*	3 doses
Varicella (chickenpox)	2 doses*	1 dose	2 doses*	1 dose
Vaccine	Grade 7 and 8		Grade 12	
Meningococcal Vaccine Types A, C, W, Y	1 dose		1 or 2 doses ^a	

†at age 11 *given at proper intervals ^asecond dose must be after age 16 or a third dose is required

Immunization records from a previous school must be signed by a health care provider. All documentation must specify the exact date the immunization was given. It is the responsibility of the parent or guardian to supply satisfactory evidence of immunization. A parental statement that a child’s immunization record is lost or unobtainable, or that the child has had the disease is not acceptable.

A child may be exempted from the immunization requirements if the parent or guardian holds genuine and sincere religious beliefs contrary to the practice of immunizations. The proper forms can be obtained from your child’s school office or health office.

Parent’s Acknowledgment of Immunization Requirements

(Please return this page to the Health Office)

Student Name: _____ Grade/Building: _____

I understand the immunization requirements as explained above and the penalty for non-compliance.

Signature of Parent/Guardian: _____ Date: _____

Name of Parent/Guardian: _____