



CERTIFICATE OF IMMUNIZATION FOR 2024-2025

EISD Rev. 9/23

Student name: _____ Date of birth: _____ Grade (2024-2025): _____

Vaccine Circle vaccine received:	Date MM/DD/YY	Requirements					
DTaP • DTP • DT • Td		KG-6th grade: 5 doses of Diphtheria-Tetanus-Pertussis vaccine are required; 1 dose must have been received on or after the 4 th birthday. ¹ However, 4 doses meet the requirement if the 4 th dose was received on or after the 4 th birthday. ¹ For students aged 7 years and older, 3 doses meet the requirement if 1 dose was received on or after the 4 th birthday. ¹ 7th grade: 1 dose of Tdap is required if at least 5 years have passed since the last dose of tetanus-containing vaccine. Td is acceptable if a medical contraindication to Pertussis exists. 8th-12th grade: 1 dose of Tdap is required when 10 years have passed since the last dose of tetanus-containing vaccine. Td is acceptable if a medical contraindication to Pertussis exists. Combination vaccines: ⁴ Pentacel DTaP+IPV+Hib ⁵ Pediarix DTaP+IPV+Hep B ⁶ Kinrix DTaP+IPV					
DTaP • DTP • DT • Td							
DTaP • DTP • DT • Td							
DTaP • DTP • DT • Td							
DTaP • DTP • DT • Td							
Tdap • Td							
IPV • OPV		KG-12th grade: 4 doses of Polio vaccine are required; 1 dose must be received on or after the 4 th birthday; ¹ however, 3 doses meet the requirement if the 3 rd dose was received on or after the 4 th birthday. ¹ If additional doses of polio vaccine were received, record the type and date below.					
IPV • OPV							
IPV • OPV							
IPV • OPV							
		IPV • OPV		IPV • OPV		IPV • OPV	
Hepatitis B ²		3 doses of Hepatitis B vaccine (HBV) are required. For students aged 11-15 years, 2 doses meet the requirement if the adult hepatitis B vaccine Recombivax [®] was received and the dose (10 mcg/1 mL) was clearly documented. If Recombivax [®] was not the vaccine received, a 3-dose series is required.					
Hib		Preschool program requirements for Hib (Haemophilus influenza type B) vaccine: 3 doses of Hib are required; 2 doses plus a booster dose on or after 12 months of age. If the 1 st dose is received at 12-24 months of age, only 1 additional dose is required (2 doses total). A child who receives 1 dose on or after 15-59 months of age is in compliance. Hib is not required for children 60 months of age and older.					
Preschool program requirements for PCV:		For a child 7-11 months of age: 2 doses are required. For a child 12-23 months of age: if 3 doses were received prior to 12 months of age, then an additional dose is required with the 4 th dose on or after 12 months of age. If 1-2 doses were received prior to 12 months of age, then a total of 3 doses are required with at least 1 dose on or after 12 months of age. If zero doses were received, then 2 doses are required with both doses on or after 12 months of age. Children 24-59 months of age meet the requirement if they received at least 3 doses with 1 dose on or after 12 months of age, or 2 doses with both doses on or after 12 months of age, or 1 dose on or after 24 months of age; otherwise, an additional dose is required (4 total). PCV is not required for children 60 months of age and older.					
PCV • PCV-7 • PCV-13							
PCV • PCV-7 • PCV-13							
PCV • PCV-7 • PCV-13							
PCV • PCV-7 • PCV-13							
PCV • PCV-7 • PCV-13							
MMR ² • MMRV ²		KG-12th grade: 2 doses of Measles-Mumps-Rubella (MMR) vaccine are required, with the 1 st dose received on or after the 1 st birthday. ¹ Students vaccinated prior to 2009 with 2 doses of measles and 1 dose each of rubella and mumps satisfy this requirement.					
MMR ² • MMRV ²							
Varicella ² • MMRV ²		KG-12th grade: 2 doses of Varicella vaccine are required, with the 1 st dose received on or after the 1 st birthday. ¹ A written statement from a physician or parent that the student had varicella disease (chickenpox) on or about (date) is acceptable in place of the vaccine. ← Record the approximate date (MM/YY) of chickenpox disease.					
Varicella ² • MMRV ²							
Chickenpox disease							
Hepatitis A ²		KG-12th grade: 2 doses of Hepatitis A vaccine are required. The 1 st dose must be received on or after the 1 st birthday. ¹					
Meningococcal MCV-4		7th-12th grade: 1 dose of MCV-4 is required on or after the student's 11 th birthday. ¹ If a student received the vaccine at 10 years of age, this will satisfy the requirement.					

¹ Receipt of the dose up to and including 4 days before the birthday will satisfy the school entry immunization requirement.

² Serologic evidence of infection or serologic confirmation of immunity to measles, mumps, rubella, hepatitis B, hepatitis A, or varicella is acceptable in place of the vaccine.

Physician signature/stamp (required)

Physician's name (printed) or stamp

Date