



STUDENT IMMUNIZATION FORM | 2024-25

Health Room Fax #: (704) 368-1078

INSTRUCTIONS: APPLIES TO ALL NEW STUDENTS, KINDERGARTEN, GRADE 7 AND GRADE 12 STUDENTS.

Please provide health room with a copy of students most recent immunization records.

STUDENT

First: _____

DOB: _____

Last: _____

Grade: _____

VACCINE-SPECIFIC REQUIREMENTS

North Carolina General Statutes (G.S. 130-A-152(a)) require immunizations for every child attending public, private or religious school present in this state to be signed by a Physician or Health Officer. This certificate MUST be completed on file within 30 calendar days of the child's first school day after which the child CANNOT attend school. Please visit rhw NC DHHS for specific immunization requirements.

STATE LAW CURRENTLY REQUIRES THE FOLLOWING MINIMUM DOSES:

KINDERGARTEN:

VACCINE	# OF DOSES REQUIRED
Diphtheria, tetanus and pertussis	5 doses
Polio	4 doses
Pneumococcal	4 doses
Measles	2 doses
Mumps	2 doses
Rubella	1 dose
Haemophilus Influenzae Type B	4 doses
Hepatitis B	3 doses
Varicella	2 doses

GRADE 7:

VACCINE	# OF DOSES REQUIRED
Meningococcal/MCV	2 doses
Tdap Booster	1 dose

GRADE 12:

VACCINE	# OF DOSES REQUIRED
Meningococcal/MCV	2 doses