

School (K-12) immunization table

Vaccines required for school entry, 2026-2027

Background:

1. This table may be used as a guide to evaluate the number of valid doses a child or adolescent must receive to comply with [state immunization requirements](#).
 2. Immunization requirements must be enforced. Students who do not meet the requirements must be denied attendance according to Board of Health rule [6 CCR 1009-2](#).
 3. Before a student's first day of school, Colorado law requires parents or guardians to provide each school their student attends with at least one of the following:
 - A. **An immunization record** showing that the child has received school-required vaccines and is up to date according to their age.
 - Schools and child cares are required to have a completed [Official Colorado Certificate of Immunization](#) in the student's electronic or hard copy file. An immunization record also includes documentation of positive titers as an acceptable alternative for certain vaccine components. Use CDPHE's [titer interpretation guidance resource](#) to determine which titers are an acceptable alternative to documentation of one or more school-required vaccines.
 - B. **An in-process plan** signed by the child's health care provider showing that the student is in the process of catching up on missing vaccine(s) following the minimum intervals between doses described in the [catch-up schedule \(Table 2\)](#).
 - Students who fall out of compliance during the school year may still attend for a limited time. Within seven days of the finding of immunization noncompliance, the school must directly notify the parent/guardian, who then has 30 days to provide the school with updated immunization documentation. This documentation must be: (1) an immunization record showing the student received the missing dose(s) of school-required vaccine(s), and if applicable, an in-process plan ([sample](#)) showing the student will be obtaining the remaining school-required vaccines following the minimum intervals between doses described in the [catch-up schedule \(Table 2\)](#), or (2) a Certificate of Medical or Nonmedical Exemption. If, after 30 days, no immunization documentation is received, the school must exclude the student per Board of Health rule [6 CCR 1009-2](#).
 - C. **A Certificate of Medical or Nonmedical Exemption** for any missing doses of school-required vaccine(s).
 - Parents/guardians/emancipated students must follow [Colorado's process](#) to obtain a certificate of exemption. Certificates of exemption expire and need to be renewed at specified intervals. Visit the [exemptions to school-required vaccines](#) webpage for more information, or the [school \(K-12\) professionals](#) webpage for guides to verify whether an exemption is complete.
- To meet the requirements, students may have one or a combination of these documents for school-required vaccines. Per Board of Health rule [6 CCR 1009-2](#), students not in compliance with the immunization requirements may not start school or child care.
4. Vaccines **required** for school (K-12) include hepatitis B (HepB), diphtheria, tetanus, pertussis (DTaP), polio (IPV), measles, mumps, rubella (MMR), varicella (chickenpox), and tetanus, diphtheria, pertussis (Tdap prior to seventh grade entry; see the [Tdap parent letter](#) on the [school \(K-12\) professionals](#) webpage).
 5. Schools and child cares can enroll in the [Colorado Immunization Information System \(CIIS\)](#), which allows them to access and review immunization records. Email cdphe_ciis_schools@state.co.us for more information.

How to use the school (K-12) immunization table:

1. Review the student's immunization record alongside this table to determine if they have the required number of valid doses.
 - A. The Colorado Board of Health follows the [immunization schedule](#) developed by the American Academy of Pediatrics (AAP) with the following exceptions:
 - Students between the ages of 4 and 6 years are required to receive their final doses of DTaP, IPV, MMR, and varicella vaccines prior to kindergarten entry.
 - Students are required to receive Tdap vaccine prior to seventh grade entry.
 - Immunization records for high school students age 19 through 21 should be assessed using Appendix A of Board of Health rule [6 CCR 1009-2](#) (pgs. 24-26).

Vaccines must be given no earlier than the [minimum intervals and ages](#) to be valid. A four-day grace period applies in most situations, though it should **not** be applied to the 28-day interval between two different live virus vaccines (such as MMR or varicella).

Vaccine	Number of doses (routine)	Routine (on time) vaccination and catch-up guidance
Hepatitis B (HepB)	3	Routine: Three-dose series at age 0 (birth), 1-2 months, and 6-18 months. The minimum age for the final dose is 24 weeks of age. If Dose 3 is given prior to 24 weeks, a fourth dose is required. Four doses of hepatitis B vaccine are permitted when a combination vaccine is used. Catch-up: Three-dose series at 0, 1-2 months, 6 months (minimum intervals of four weeks between Dose 1 and Dose 2, eight weeks between Dose 2 and Dose 3, and 16 weeks between Dose 1 and Dose 3). There is a two-dose option (adult Recombivax HB, minimum interval of four months between doses) for adolescents aged 11-15, and a two-dose option for adults aged 18 and older (Heplisav-B, minimum interval of four weeks between doses).
Diphtheria, tetanus, pertussis (DTaP) DTaP products are licensed through 6 years of age.	5	Routine: five-dose series at 2, 4, 6, 15-18 months, and 4-6 years Catch-up: Dose 5 is not required if Dose 4 was administered on or after the 4th birthday and at least 6 months after Dose 3. Use the DTaP catch-up guidance job aid for guidance for children 4 months through 6 years.
Tetanus, diphtheria, pertussis (Tdap) For routine use in adolescents and adults age 11 and older. May be used for students aged 7-10 years for catch up.	1	Routine: For students who are fully vaccinated with the childhood series of DTaP (see above), one dose of Tdap is required prior to seventh grade entry. Refer to the Tdap letter on the school (K-12) professionals webpage for more information. Catch-up: For children 7-9 years who are not fully vaccinated with the childhood series of DTaP, determine the number of additional doses of Tdap/Td required by using the Tdap catch-up guidance job aid. For children and adolescents 10-18 years who are not fully vaccinated with the childhood series of DTaP, determine the number of additional Tdap/Td doses required by using the Tdap catch-up guidance job aid.
Polio (IPV) Doses of oral polio virus (OPV) administered on or after April 1, 2016, should not be counted as valid.*	4	Routine: Four-dose series at ages 2, 4, 6-18 months, and 4-6 years. Regardless of the number of doses a student has received, the final dose must be administered on or after the 4th birthday and at least six months after the previous dose. Catch-up: Dose 4 is not required if Dose 3 was administered on or after the 4th birthday and at least six months after Dose 2. For guidance for children 4 months through 17 years, use the IPV catch-up guidance job aid. *Both IPV and valid doses of OPV may be used to complete a polio series. The total number of doses needed to complete the series is the same as that recommended for the U.S. IPV schedule. For students 18 years and older who are known or suspected to be unvaccinated or incompletely vaccinated against polio, refer to the immunization schedule or Appendix A of 6 CCR 1009-2.
Measles, mumps, rubella (MMR) If two live vaccines are not given on the same day, there must be at least a 28-day interval between the two doses.	2	Routine: Two-dose series at 12-15 months and 4-6 years. Dose 1 is not valid if administered more than four days before the 1st birthday. Some children will receive Dose 2 before their 4th birthday. This is valid if both doses are given after the 1st birthday and separated by at least 28 days. Catch-up: Two-doses separated by at least 28 day
Varicella (chickenpox) If two live vaccines are not given on the same day, there must be at least a 28-day interval between the two doses.	2	Routine: Two-dose series at 12-15 months and 4-6 years. Dose 1 is not valid if administered more than four days before the 1st birthday. Note: If a child has previous varicella disease documented by a health care provider or a documented positive antibody titer, the child has met the varicella requirement, and no varicella vaccine is required. Catch-up: Age 7-12 years: three months between Dose 1 and 2. Age 13 years and older: 28 days between Dose 1 and 2