



**SCHOOL OF
ST. ELIZABETH**
BERNARDSVILLE, NEW JERSEY

SIXTH GRADE VACCINATION FORM

The New Jersey Department of Health requires that all sixth grade students receive the Tdap vaccine and the meningococcal vaccine. Proof that your child has received these vaccines is required before beginning the 6th grade year. Your physician/health-care provider must complete this form **OR** provide an updated immunization record indicating proof of administration of these mandatory vaccines.

As a reminder, a current State of New Jersey Universal Health Record is also required for all students. In addition, student athletes must complete and submit the Sports Form Packet, which includes a participation form that must be signed by your physician.

Download New Jersey
Universal Health Record

[CLICK HERE](#) 

Please print and return all signed forms to the school office, ATTN: SCHOOL NURSE

TO BE COMPLETED BY HEALTHCARE PROVIDER:

Student Name: _____

TDAP Vaccine

Date administered: _____

Meningococcal Vaccine

Date administered: _____

Signature of Healthcare Provider

Date

Healthcare Provider Stamp (Required)

Date