

**WANTAGH UNION FREE SCHOOL DISTRICT**

Wantagh, NY 11793

**IMMUNIZATION RECORD**

Students Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

VACCINE	DATE OF IMMUNIZATION				
Polio (IPV/OPV)	1. _____	2. _____	3. _____	4. _____	5. _____
MMR	1. _____	2. _____			
DTaP	1. _____	2. _____	3. _____	4. _____	5. _____
DTP	1. _____	2. _____	3. _____		
Tdap	1. _____	2. _____			
HIB (haemophilus influenza B)	1. _____	2. _____	3. _____	4. _____	
Hepatitis B	1. _____	2. _____	3. _____		
Varicella	1. _____	2. _____	_____ disease	_____ immunization	
Hep A	1. _____	2. _____	3. _____		
HPV	1. _____	2. _____	3. _____		
Meningococcal	1. _____	2. _____			

Other- Name: \_\_\_\_\_ Dates: \_\_\_\_\_

Doctor's Signature: \_\_\_\_\_ Doctor's Stamp: \_\_\_\_\_

**MINIMUM REQUIREMENT FOR SCHOOL ATTENDANCE:**

- DTaP, DTP:** 4-5 doses required
- Tdap:** Required for students grades 6-12, must be received by age 11
- Polio (IPV/OPV):** 3-4 doses required
- MMR:** 2 doses required for kindergarten entrance
- Hepatitis B:** 3 dose series required
- Varicella:** 2 doses required for Kindergarten through 3rd grade entrance starting 9/17  
2 doses required for entrance to 6<sup>th</sup> through 9<sup>th</sup> grade starting 9/17
- Meningococcal:** 1 dose required in 7<sup>th</sup> grade as of 9/16. 2 doses required for 12<sup>th</sup> grade entrance as of 9/16 unless first dose given at age 16 or older.