



RBCS Immunization Record

Family Name: _____ First Name: _____ MI: _____

Date of Birth: _____ Parent or Guardian Signature: _____

Immunizations required for school admittance:

Students enrolled in kindergarten through grade 12 are required to have written proof on file at their school that they have been immunized against DTP (Diphtheria, tetanus, pertussis), poliomyelitis, measles, mumps, and rubella (MMR), Hepatitis B, Hib/PRP (Haemophilus influenzae type b vaccine), and Varicella (chickenpox).

Minimum Immunization Requirements:

Five or more doses of DTP/DPT, DT (pediatric), TD (adult) vaccine or a combination thereof.

***A TD booster is required within the last five years.*

Three or more doses of trivalent oral polio vaccine (TOPV/Polio).

Four doses of Hib vaccine.

Two doses MMR vaccine (Measles, Mumps, Rubella—combined or two each, if separate).

Three doses of Hepatitis B vaccine.

Two doses of Varicella vaccine (Not required if child has documentation of history of varicella disease).

If the final dose of any of the above vaccines occurs before the third birthday, a booster shot is required.

IMMUNIZATIONS

DTP/DPT	1. _____ date	2. _____ date	3. _____ date	4. _____ date	5. _____ date	6. _____ booster
TOPV (polio)	1. _____ date	2. _____ date	3. _____ date	4. _____ booster, if required		
Hib	1. _____ date	2. _____ date	3. _____ date	4. _____ date		
MMR (combined)	1. _____ date	2. _____ date	3. _____ booster, if required			
(Separate)	1. _____ date	2. _____ date	3. _____ date	4. _____ date	5. _____ date	6. _____ date
Hepatitis B	1. _____ date	2. _____ date	3. _____ date			
Varicella	1. _____	2. _____	_____			
			date of disease			

Signature of Physician: _____ Date: _____