

## GUILDERLAND CENTRAL SCHOOL DISTRICT IMMUNIZATION POLICY

Public Health Law 2164 requires that those children entering  
School must meet the following vaccine requirements:

1. 4-5 doses of DTP or DTaP ( diphtheria, tetanus, pertussis); 3 doses grades 9-12
2. 3-4 doses of IPV/OPV (polio)
3. 2 dose of MMR vaccine (measles, mumps, rubella)
4. 3 doses of Hepatitis B
5. 2 doses of Varicella (chicken pox) 1 dose grades 9-12
6. 1 dose of Tdap (tetanus, diphtheria, pertussis) for students entering 6<sup>th</sup> Grade
7. 1 dose Meningococcal vaccine entering 7<sup>th</sup> grade; 2 doses required for 12<sup>th</sup> Grade

A student will not be admitted unless a person in parental relation to the student furnishes the entering school with one of the following:

1. A certificate of immunization signed by the administering physician
2. A signed statement from the physician stating medical reason for exemption

---

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

DTP/DTaP    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_

IPV/OPV    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_

MMR    \_\_\_\_\_    \_\_\_\_\_

Hep B    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_

Varicella    \_\_\_\_\_    \_\_\_\_\_

Tdap    \_\_\_\_\_

Meningococcal    \_\_\_\_\_    \_\_\_\_\_

**PHYSICIAN'S SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_