

IMMUNIZATION RECORD FORM

MMR REQUIREMENTS

New York State Public Health Law 2165 requires college students enrolled for six (6) or more semester hours to show proof of immunization against measles, mumps and rubella. Students born prior to Jan. 1, 1957, are exempt from this requirement. Please have your healthcare provider complete, sign and stamp this form. The completed form must be submitted to the St. Joseph's University wellness center prior to the first day of classes. Students who fail to submit this form and comply with the law will not be allowed to attend classes and will be withdrawn from the University.

Please print:

Name _____
Last First M.I. Maiden

Street address _____ Phone _____

City _____ State _____ ZIP _____

Social Security number _____ SJNY ID number _____ Date of birth _____

HEALTH CARE PROVIDER TO COMPLETE BELOW

MMR (measles, mumps, rubella) - If given as a combined dose instead of individual immunizations

Dose 1: Immunized no more than four days prior to first birthday Date ____/____/____

Dose 2: Immunized as above and at least a minimum of 28 days after the first dose Date ____/____/____

OR

Measles - Two doses at least 28 days apart, given no more than four days prior to first birthday

Dose 1: Date ____/____/____

Dose 2: Date ____/____/____

Mumps - One dose given no more than four days prior to first birthday Date ____/____/____

Rubella (German Measles) - One dose given no more than four days prior to first birthday Date ____/____/____

OR

Serologic Evidence of Immunity (**lab report must be attached**; equivocal titers are not acceptable)

Measles- Titer Date: _____ Result: _____

Mumps- Titer Date: _____ Result: _____

Rubella- Titer Date: _____ Result: _____

Health Care Provider (Official stamp is required; no form will be accepted without stamp or license number if no stamp is available.)

Name _____ Phone _____

Signature _____ License number _____

Date _____

STAMP:

Please upload completed forms to the secure portal: sjny.medicatconnect.com. Please be sure to keep a copy for your records.

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