

IMMUNIZATION REQUIREMENTS - INTERNATIONAL STUDENT

LAST NAME	FIRST NAME	MIDDLE
DATE OF BIRTH mm/dd/yyyy	UNIVERSITY ID #	SEMESTER START (CHECK ONE):
		<input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER 20_____

REQUIRED IMMUNIZATIONS

Measles: Iowa State University requires that all new (including transfer and graduate) students born on or after January 1, 1957, show proof of immunization or immunity to measles. Measles immunizations may be found on your immunization record listed as Measles, MMR, MR, or Rubeola (titer).

MEASLES	Vaccine must be given at least 28 days apart and after 12 months of age. Two (2) measles doses required OR positive measles titer). Doses administered at less than the minimum interval or earlier than the minimum age are not valid and must be repeated. Complete one of the options below.		
Option 1			
Measles	Dose 1 TYPE <input type="checkbox"/> MMR <input type="checkbox"/> MR <input type="checkbox"/> MEASLES	Dose 1 mm/dd/yyyy [][] [][] [][][][]	Dose 2 TYPE <input type="checkbox"/> MMR <input type="checkbox"/> MR <input type="checkbox"/> MEASLES
		Dose 2 mm/dd/yyyy [][] [][] [][][][]	
Option 2			
Positive (+) Rubeola IgG	mm/dd/yyyy [][] [][] [][][][]	mm/dd/yyyy [][] [][] [][][][]	<input type="checkbox"/> Lab report attached
Option 3			

DOCUMENTATION OF WAIVER

Submit **proof of religious or medical exemption** by attaching the appropriate Iowa Department of Public Health Exemption to this signed document.

RECOMMENDED IMMUNIZATION

Meningitis: The State of Iowa requires that all colleges and universities provide information on the meningitis vaccination to incoming students. If you will be living in the residence halls, it is recommended by the CDC that you receive this vaccination. **This vaccination is not required, but it is recommended.**

Meningitis MCVY	mm/dd/yyyy [][] [][] [][][][]	mm/dd/yyyy [][] [][] [][][][]
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