Immunization Form

North Carolina law requires that every child attending public school has the following immunizations. It is the parent/guardian’s responsibility to provide a record of these immunizations to the school.

Immunization Requirements for Grades Kindergarten - Twelve (K-12):

- **Five (5) DTaP**
  - Diptheria, Tetanus, Acellular Pertussis
  - One dose must be on or after the child’s 4th birthday. If child’s 4th DTaP is on or after the 4th birthday, then a 5th DTaP dose is not required.

- **Four (4) Polio**
  - If the child’s 3rd Polio was on or after the 4th birthday, then a 4th Polio dose is not required.

- **Two (2) MMR**
  - Measles, Mumps, Rubella
  - All vaccination dates must be on or after the child’s 1st birthday. Two full doses of MMR are recommended; the minimum requirement is 2 Measles, 1 Mumps and 1 Rubella.

- **Three (3) HEP B**
  - Hepatitis B
  - All students born on or after July 1, 1994.

- **Varicella (1)**
  - All students born on or after April 1, 2001.

Additional Requirements for Kindergarten Students:

- **One (1) HIB**
  - Hemophilus Influenzae, b
  - Minimum of 1 dose is required prior to 5th birthday.

- **Physical Exam**
  - Kindergarten Health Assessment Report form is available at Lincoln Center’s Registration Office, the school nurse at your child’s school or online at [www.checs.k12.nc.us/departments/coordinatedschoolhealth](http://www.checs.k12.nc.us/departments/coordinatedschoolhealth).

**Note:** Permanent enrollment in school is contingent upon completion of the above health requirements. Official immunization records (signed and/or stamped by a physician or health clinic) and physical examination (kindergarten only) must be provided to the child’s assigned school by the **first day of class**. Students will be suspended from school after 30 calendar days if they have not yet shown proof of physical exam or immunizations. If you have questions, please contact the nurse at your child’s school.

I am completely aware of the requirements as outlined above and affix my signature below in acknowledgment thereof.

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Parent’s Signature  Date

Student’s Name  School  Grade