

North Caldwell Board of Education

132A Gould Avenue North Caldwell, NJ 07006 **Phone**: 973-712-4400

www.ncboe.org

IMMUNIZATION RECORD

Child's name:	Date of birth:				
Vaccine (Requirements Attached)	1st dose	2 nd dose	3 rd dose	4 th dose	Booster
DPT series and booster 4 doses (1 after 4 th birthday)					
Tdap 1 dose for pupils entering Grade 6 (not needed until five years after the last DPT/Td dose)					
Polio series and booster 3 doses (1 after 4 th birthday) or 4 appropriately spaced doses					
Measles (preferably MMR) 1 dose on or after 1 st birthday. 2 nd dose before beginning school					
Rubella 1 dose on or after 1 st birthday. If before 1 st birthday, must reimmunize – preferably MMR					
Mumps 1 dose on or after 1 st birthday. If before 1 st birthday, must reimmunize – preferably MMR					
Hepatitis B 3 doses required					
Influenza Required ANNUALLY while attending pre-school					
Varicella 1 dose required before entering Kindergarten/1 st Grade (whichever occurs first)	Vaccine Date				Disease (check here)
Pneumococcal 1 dose while attending pre-school					
HIB 3 doses given before entering the pre-school program					
Meningococcal 1 dose for pupils entering Grade 6 and age 11 or older					
No child will be permitted to enter school without a doctor's certif	icate which s	tates the chile	d has been ac	lequately im	munized.
Signature of physician			Date		

*Please be advised that all immunizations must meet the required minimum age and intervals between doses. Please refer to the following websites for more information:

http://nj.gov/health/cd/documents/vaccine_qa.pdf

https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/a/age-interval-table.pdf

DPT

A minimum of four (4) doses of DPT vaccine is required. ONE DOSE MUST BE GIVEN ON OR AFTER THE FOURTH BIRTHDAY.

POLIO

A minimum of three (3) doses of oral polio is required. ONE DOSE MUST BE GIVEN ON OR AFTER THE FOURTH BIRTHDAY.

• **MEASLES** (preferably MMR)

One (1) dose of measles vaccine GIVEN ON OR AFTER THE FIRST BIRTHDAY. Fifteen months is the recommended age for measles vaccination. A SECOND DOSE OF MEASLES VACCINE, PREFERRABLY MMR, IS REQUIRED OF ALL CHILDREN BORN AFTER JANUARY 1, 1990.

• **GERMAN MEASLES** (rubella)

One (1) dose of rubella vaccine GIVEN ON OR AFTER THE FIRST BIRTHDAY.

MUMPS

One (1) dose of mumps vaccine GIVEN ON OR AFTER THE FIRST BIRTHDAY.

HEPATITIS B

Three (3) doses of hepatitis B vaccine GIVEN BEFORE ENTERING KINDERGARTEN/GRADE 1 (whichever occurs first).

INFLUENZA

Beginning in September 2008 children attending pre-school or licensed childcare center are required to receive an ANNUAL influenza vaccine.

• **VARICELLA** (chicken pox)

One (1) dose of varicella vaccine GIVEN BEFORE ENTERING KINDERGARTEN/GRADE 1 (whichever occurs first). If your child has had the chicken pox disease, a note is required with the month, day and year of the disease for school records.

• PNEUMOCOCCAL (pneumonia)

Beginning in September 2008 children attending pre-school or licensed childcare center are required to receive 1 dose of pneumococcal vaccine.

HIB

Three (3) doses of HIB GIVEN BEFORE ENTERING THE PRE-SCHOOL PROGRAM.

Tdap

1 dose for students entering Grade 6 (not needed until 5 years after the last DPT/Td dose)

MENINGOCOCCAL

One dose for students entering Grade 6 and age 11 or older.