

## Immunization Requirements/Exemption

Vaccines are a safe and inexpensive way to provide long lasting protection against certain diseases which may cause permanent mental or physical damage to your child.

Maine State Law requires that all school children in Kindergarten through grade 12 be protected against Diphtheria , Pertussis (whooping cough), Tetanus (lock jaw), Polio, Measles, Rubella (German measles) and Mumps . **Upon registering** for school, all children must present an immunization **record signed by a physician, nurse or other person who administered the vaccine**, unless the child is exempted (see exemptions below). The record must show the complete date (month, day, year) and type of vaccine given.

### Immunization Requirements

The following represents MINIMAL requirements only. Parents are urged to consult with their family physician or public health agency regarding additional doses and types of vaccines that are recommended.

5 Doses of DPT, DT (pediatric) and/or Td or Tdap (adult) Vaccine.

4 Doses of Oral Polio or Inactivated Polio (at least one dose administered after the first birthday.

2 Doses of Measles Vaccine (administered after the first birthday)

2 Doses of Rubella Vaccine (administered after the first birthday)

2 Doses of Mumps Vaccine (administered after the first birthday)

Varicella (1 to 2 doses depending upon age), administered after the first birthday or a health record from your primary care provider showing your child has had chickenpox or the results of a blood test confirming your child is immune to chickenpox.

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

SCHOOL NAME \_\_\_\_\_ GRADE \_\_\_\_\_

### Exemptions and Exclusion from School

A small number of children will not be able to receive immunizations, usually for medical or philosophical reasons.

School children exempted from immunization will be excluded from school if one of the diseases for which immunization is required is identified in the community.

Children excluded from school will be prohibited from attending school until either

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the child has been immunized, the disease or outbreak has passed, or the youngster contracts the disease and completely recovers.

Parents seeking an exemption to the immunization requirements for their child for medical reasons must have the medical section **completed by the child's physician.**

**MEDICAL EXEMPTION** (physician to complete A or B, date and sign)

A. The following immunizations are harmful to this child's health\_\_\_\_\_

\_\_\_\_\_

B. I observed this child while he/she experienced the following illnesses and vaccine designed to protect against the disease named is not necessary\_\_\_\_\_

\_\_\_\_\_

DATE\_\_\_\_\_

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

Parents or Guardians seeking exemption for **philosophical** reasons must provide a **written statement** below:

I philosophically object to immunization for my child,\_\_\_\_\_ because...

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE\_\_\_\_\_SIGNATURE\_\_\_\_\_

**All exemptions must be submitted annually to the school nurse.**