

TENNESSEE WESLEYAN COLLEGE

Certificate of Immunization and Insurance

Name _____ SS# _____
Last First Middle Initial

Date of Birth (M/D/YY) _____ Entrance Date: Semester _____ Yr. _____

Home Address _____ Phone _____

Individual to Notify In Case of Emergency _____

Relationship _____ Phone _____

Current Health Problems _____

Medications Frequently Used _____

Allergies (Medications, Foods, Substances, etc.) _____

INSURANCE INFORMATION

Please include information for the person responsible for paying the student's medical bills. **Attach a copy of the front and back of any applicable insurance cards.**

Guarantor _____
Name Birthdate Social Security# Relationship to student
Address Phone

Employer _____
Name Address Phone

Insurance Co. _____
Name Policy Number/Group Number Address Phone

Immunization Status

All students are required to submit official documentation of 2 MMR immunizations unless contraindicated by a medical condition documented by a physician's statement of contraindicated due to religious beliefs. Physician may complete and sign this form or provide written documentation showing proof of immunization.

VACCINE	DATES GIVEN (M/D/YR)	PHYSICIAN'S SIGNATURE
MMR (Required) (Measles, Mumps, Rubella)	Dose #1 _____ Dose #2 _____	
Hepatitis B Series of 3 Doses (Recommended)	Dose #1 _____ Dose #2 _____ Dose #3 _____	
Meningitis Vaccine (Recommended)	Date _____	
TB Skin Test (Recommended)	Date _____ Results _____	
Varicella (Required)	<input type="checkbox"/> Vaccine Dose #1 _____ OR <input type="checkbox"/> Diagnosed History of Chickenpox Vaccine Dose #2 _____	

I have received and read the Tennessee Wesleyan College letter regarding meningitis and hepatitis B. I am aware of the risks associated with each and the options available to me with regards to vaccination. I hereby authorize Tennessee Wesleyan College and its insurance provider to inspect or secure copies of case history records, laboratory reports, diagnoses, x-rays, and other data covering previous confinements and/or disabilities. A copy of this authorization shall be deemed as effective and valid as the original. I further authorize the medical staff at Tennessee Wesleyan College to provide medical care. In the event that medical care is needed beyond the services that can be provided by Tennessee Wesleyan College personnel, I authorize local or regional hospital(s) and physician(s) to render service. I also authorize the hospital to release medical information to authorized representatives of Tennessee Wesleyan College. We, the parents/guardians, will be responsible for the fee for such services. You may bill us for the amount due.

Student Signature _____ Date _____

Parent signature (if student is under 18) _____ Date _____

Please return this form to: Tennessee Wesleyan College Student Life Office, 204 East College Street, Athens, TN 37303

The Athletic Department will require an additional form for all athletes. Please call (423) 746-5300 to receive a Physical Examination Form.

**Tennessee Department of Health Immunization Requirements for Students Enrolling in
Higher Education Institutions in Tennessee after July 2011:**
(Tennessee Department of Health Rule 1200-14-1-.29, revised December 2009)

Who is required to be immunized?

- New **full time** enrollees in higher education institutions (post-secondary) in Tennessee with enrollments larger than 200 students; new undergraduates enrolled in at least 12 semester hours, or equivalent; and new graduate students enrolled in at least 9 semester hours, or equivalent

Exempt: full time distance learning students are exempted from immunization requirements

Measles, Mumps and Rubella Immunity:

- Proof of immunity to measles, mumps and rubella may be provided by meeting one of the following 3 criteria:
 - 1) Date of birth before 1957, *or*
 - 2) Documentation of **2 doses** vaccine against measles, mumps and rubella given at least 28 days apart, excluding doses given earlier than 4 days before the first birthday, *or*
 - 3) Documentation of blood test (serology) showing immunity to measles, mumps **and** rubella. If any one of the three is negative, 2 doses of vaccine must be documented.

Hepatitis B Immunity (only for health science students expected to have patient contact):

- Proof of immunity to hepatitis B for students in health sciences prior to patient care duties may be documented in one of the following ways: 1) Documentation of 3 doses of hepatitis B vaccine, *or* 2) Blood test (serology) showing immunity to hepatitis B virus (or infection)

NEW REQUIREMENT FOR STUDENTS ENROLLING JULY, 2011: Varicella (Chickenpox) Immunity:

- Proof of immunity to varicella (chickenpox) is required by meeting one of the following 4 criteria:
 - 1) Date of birth before 1980, *or*
 - 2) History of chickenpox illness diagnosed by a healthcare provider or verified by a physician, advanced practice nurse or physician assistant to whom the illness is described, *or*
 - 3) Documentation of 2 doses of varicella vaccine given at least 28 days apart, excluding doses given earlier than 4 days before the first birthday, *or*
 - 4) Documentation of blood test (serology) showing immunity to varicella.

Valid exemptions to above requirements:

- **Medical:** Physician or health department indicates that certain vaccines are medically exempted (because of risk of harm). Any vaccines not exempted remain required.
- **Religious:** Requires a signed statement by the student that vaccination conflicts with his or her religious tenets or practices.

Students who need 2 doses of above vaccines, but cannot get both doses before classes start: Such students may enroll with documentation of one dose of each required vaccine, but require timely submission of proof of complete immunization. Such policies might include not releasing semester grades or not allowing course registration for the next semester until proof of complete immunization is provided.

Location of immunization records: You may contact the original immunization provider: if a local health department, contact them directly; if a private medical office, contact that office. Schools may have copies of immunization certificates in student files. Children born after the mid-1990s may have records entered in a state-managed immunization registry; such registries now exist in many states, but are unlikely to contain information on adults. If records cannot be located, vaccination is recommended – additional doses of vaccine are not harmful.

Students who do not have all required immunizations

The new TDH rules explicitly permit conditional enrollment after the first dose of each required vaccine, if a student does not have time to complete vaccination before enrollment. However, the institution is expected to take steps to ensure the student provides timely documentation of complete immunization (such as restricting class registration for the next semester or not releasing grades).

For more information

The TDH rules are online at <http://www.state.tn.us/sos/rules/1200/1200-14/1200-14.htm> (click on 1200-14-1, see rule 1200-14-1-.29). Information about new requirements also will be posted on the TDH websites (<http://health.state.tn.us/CEDS/required.htm> or <http://twis.tn.gov>). You may contact the Tennessee Immunization Program in the Communicable and Environmental Disease Services Section of TDH if you have questions: (615) 741-7247.