

Certificate of Immunization

MIDDLE TENNESSEE STATE UNIVERSITY REQUIRES FULL-TIME STUDENTS TO PROVIDE PROOF OF TWO (2) DOSES OF MEASLES, MUMPS, AND RUBELLA (MMR) VACCINE ON OR AFTER THE FIRST BIRTHDAY OR PROOF OF IMMUNITY TO MEASLES, MUMPS, AND RUBELLA. YOU WILL NOT BE ALLOWED TO REGISTER FOR MORE THAN 11.99 HOURS FOR UNDERGRADUATES OR MORE THAN 8.99 HOURS FOR GRADUATES UNTIL AN ACCEPTABLE FORM IS ON FILE IN THE STUDENT HEALTH SERVICES OFFICES.

Please disregard this form if you were born before 1957 or if you graduated from a Tennessee public or private high school in 1999 or thereafter. Graduate students requesting this exemption may submit a copy of their high school diploma as proof.

PART I
(to be completed by student)

Name _____
Last First Middle
Date of birth _____ Student ID No. M _____

PART II
(to be completed and signed by physician)
(Dates must include month and year)

MMR-Check appropriate box:

| | month | day | year |
|--|----------|-------|-------|
| <input type="checkbox"/> Immunized with MMR | 1. _____ | _____ | _____ |
| | 2. _____ | _____ | _____ |
| <input type="checkbox"/> Had diseases, confirmed by medical record | _____ | _____ | _____ |
| <input type="checkbox"/> Has immune Rubeola, Mumps, and Rubella titer confirming disease | _____ | _____ | _____ |
| <input type="checkbox"/> Medically contraindicated because of medical condition (i.e. allergy to vaccine, pregnancy, etc.) Must list reason(s): _____ | | | |

Health Care Provider
(Please print unless office stamp is used)

Name _____
Address _____
Signature _____ Office phone _____

PART III
(If applicable)

I refuse immunization because of religious objections, have attached an official clergy statement, and affirm this reason under the penalties of perjury.

Signature _____ Date _____

Student Health Services
MTSU P.O. Box 237
Murfreesboro, Tennessee 37132
Phone: (615) 898-2988
FAX: (615) 898-5004



READ CAREFULLY

Please disregard this form if you were born before 1957 or if you graduated from a Tennessee public or private high school in 1999 or thereafter. Graduate students requesting this exemption may submit a copy of their high school diploma as proof.

Middle Tennessee State University requires students to provide proof of two (2) doses of Measles, Mumps, and Rubella (MMR) vaccine on or after the first birthday or proof of immunity to measles, mumps, and rubella.

In an attempt to maintain a safe and healthy campus environment, Middle Tennessee State University requires that **all entering students, born after 1956**, furnish documented proof of having immunity to measles, mumps, and rubella or having been immunized with two doses of MMR vaccine on or after the first birthday unless contraindicated because of pregnancy, allergy to a vaccine component, or other valid medical reason(s).

The law states that immunizations are not required if they "conflict with the parents' or guardians' (or individuals over 18) religious tenets and practices, affirmed under the penalties of perjury." They are also not required if a qualified physician shall certify that administration of such immunization would be in any manner harmful to the child involved." (TCA Section 49-6-5001)

The Certificate of Immunization on the back of this letter must be completed and signed by a licensed M.D. or D.O. and returned to MTSU Student Health Services. An official copy of a State Health Department or military immunization form will be accepted.

YOU WILL NOT BE ALLOWED TO REGISTER FOR FULL-TIME HOURS UNTIL AN ACCEPTABLE FORM IS ON FILE IN THE STUDENT HEALTH SERVICES OFFICE.

We urge you to give this your immediate attention so that you do not encounter unnecessary delays when you register. We look forward to your joining us at Middle Tennessee State University.