

# STATE IMMUNIZATION POLICY

BANNERID#_	
	If unknown leave blank

Admissions Office • 950 Main St • Hartford, CT 06103 • Phone 860-906-5140 • Fax 860-906-5129 • Email CA-Admissions@CapitalCC.edu

#### Students must comply and return this completed document to the Admissions Office prior to registration.

If you were born after December 31, 1956, Connecticut State Law requires that all full-time (degree seeking and non-degree/non-matriculating) and part-time matriculating students enrolled in postsecondary schools be adequately protected against measles, mumps and rubella. In addition, beginning on August 1, 2010 all full-time and matriculating students, except those born in the continental United States prior to January 1, 1980, must provide proof of immunization against varicella (chicken pox). Students must have two (2) doses of each vaccine administered at least one (1) month apart to insure adequate immunization

ne of Student			SS#	Date of Birth	//
dressStreet			City/Town	State	Zip Code
This section must be coperating under the d	ECORD OF IMMU ompleted by either a phy lirection of a physician ( assistant, or nurse practi	vsician or someone ex. School nurse,	OR CONFIRM Test results (Titer) for lab or document that you have document a confirmed case	already had the disease(s	EASE ed to this form e). If you cannot ou must submit
Vaccination Type	1 <sup>st</sup> Dose	2 <sup>nd</sup> Dose	Date of Test	Result of Test	Date of Disease
Measles	mo/day/yr / /	mo/day/yr / /	mo/day/yr / /		
Mumps	mo/day/yr / /	mo/day/yr / /	mo/day/yr / /		
Rubella	mo/day/yr / /	mo/day/yr / /	mo/day/yr / /		
		(	)R		
MMR	mo/day/yr / /	mo/day/yr / /	mo/day/yr / /		
		A	ND		
Varicella (Born after 1/1/1980)	mo/day/yr / /	mo/day/yr / /	mo/day/yr / /		
OPTION 1 & 2: This received the immunization			ereby certify that this student by as indicated.	has	
Signature of physician or a			 Date	-	

OPTION 3 & 4: Medical or Religious exemptions on the reverse side

Physician's stamp or DEA number

## **IMMUNIZATION WAIVERS**

### **OPTION 3: MEDICAL EXEMPTION**

Students with medical exemptions shall be permitted to attend college except in the case of a vaccine-preventable disease outbreak in the college. All susceptible students will be excluded from college based on public health officials' determination that the college is a primary site for disease exposure, transmission and spread into the community. Students excluded from college for this reason will not be able to return to school until:

- 1. the danger of the outbreak has passed as determined by public health officials;
- 2. the student becomes ill with the disease and completely recovers, or;
- 3. the student is immunized.

According to State statutes, (Connecticut General Statues Sections 19a-7f and 10-204a) no student may register for classes without proof of immunization or a statement of exemption. Students seeking an exemption on the basis that a given immunization is medically contraindicated must attach a statement to the form signed by their physician stating that in the physician's opinion, such immunization is medically contraindicated and why it is contraindicated. In addition, the student should complete the following statement and return it to the CCC Admissions Office.

I am submitting the <b>enclosed documentation</b> from a physician that immunization is medically contraindicated. Therefore, I am exempt from receiving the required immunization as specified by the physician, and shall be permitted to attend college except in the case of a vaccine-preventable disease outbreak in the school.				
Student Name	Student Signature			

### **OPTION 4: RELIGIOUS EXEMPTION**

Students with religious exemptions shall be permitted to attend college except in the case of a vaccine-preventable disease outbreak in the college. All susceptible students will be excluded from college based on public health officials' determination that the college is a primary site for disease exposure, transmission and spread into the community. Students excluded from college for this reason will not be able to return to school until:

- 1. the danger of the outbreak has passed as determined by public health officials;
- 2. the student becomes ill with the disease and completely recovers, or;
- 3. the student is immunized.

According to State statutes, (Connecticut General Statues Sections 19a-7f and 10-204a) no student may register for classes without proof of immunization or a statement of exemption. Students seeking an exemption on the basis that immunizations would be contrary to their religious beliefs should complete the following statement and return it to the CCC Admissions Office.

I hereby assert that immunizations would be contrary to my religious beliefs. Therefore, I am exempt from receiving the required immunization under
Section 10-201a of the Connecticut General Statutes and shall be permitted to attend college except in the case of a vaccine-preventable disease
outbreak in the school.

Student Signature

Student Name