MEASLES DOCUMENTATION

CERTIFICATE OF IMMUNIZATION for STUDENT HEALTH SERVICES

Last Name ____________________________ First Name ____________________________ MI ______

Date of Birth  day_______ month_______ year ______  Student my.CU ID ___G00__________

Year /Semester of Entry: Year ________ Semester □ Fall □ Spring □ Summer 1 □ Summer 2

Oregon state law mandates 4 year college students * provide evidence for 2 doses of measles (rubeola) vaccine after age 12 months. There must be a minimum of 28 days between the 2 doses. Usually listed as MMR.

* born after January 1, 1957 and taking 12 or more credits (undergrads) and 6 or more credits (grads)

Yes I had 2 doses of measles (rubeola) vaccine after age 12 months. Doses were at least 28 days apart.

#1  day_______ month_______ year_______  # 2  day_______ month_______ year_______

Born prior to 1984? If date of # 1 is not available then date of # 2 must be after December 1,1989.

Student Signature__________________________________________ Date ______________________

Exemptions

1.  I was born before January 1, 1957.  
   Student signature__________________________________________ Date ______________________

2.  Blood test (titer report) for measles (rubeola) is attached and indicates I am immune to measles.  
   Student signature__________________________________________ Date ______________________

3.  I had the disease / measles (rubeola).  Date ________________  
   Physician, nurse practitioner or physician assistant signature ________________________________

4.  Medical reason to not receive immunization (anaphylactic reaction to gelatin, immune compromised, etc.)  
   Date ________________  
   Physician, nurse practitioner or physician assistant signature ________________________________

5.  My religious beliefs prohibit this immunization.  
   Student signature__________________________________________ Date ______________________

STUDENTS NOT COMPLETING THIS CERTIFICATE ARE NOT ALLOWED TO REGISTER FOR CLASSES

Concordia University Student Health Services 2811 NE Holman Street Portland, OR 97211-6099

Revised May 2012