

# THE DIOCESE OF DALLAS IMMUNIZATION RECORD

(Required)

Student's Name: \_\_\_\_\_ Sex: \_\_\_\_\_

Date of Birth (DOB): \_\_\_\_\_ Grade: \_\_\_\_\_ Room Number: \_\_\_\_\_

This form must be validated by a physician's signature or health clinic stamp.  
 Dates for all immunizations must include month, day, and year.

**No Conscientious Exemption waivers on the basis of religious beliefs are given in The Diocese of Dallas.**

IMMUNIZATION	M/D/Yr	M/D/Yr	M/D/Yr
<b>Diphtheria, Tetanus and Pertussis Vaccine</b> Five doses unless the 4 <sup>th</sup> dose in the series was administered on or after the 4 <sup>th</sup> birthday Students 7 years or older: Three doses including one dose administered on or after the 4 <sup>th</sup> birthday <u>7<sup>th</sup> Grade Students:</u> One booster dose required if at least five years have passed since the last dose of tetanus containing vaccine was administered	#1	#2	#3
	#4	#5	<b>Booster</b>
<b>Polio (IPV / OPV) Vaccine</b> Four doses unless the 3 <sup>rd</sup> dose in the series was administered on or after the 4 <sup>th</sup> birthday.	#1	#2	#3
	#4		
<b>Measles, Mumps, Rubella (MMR) Vaccine</b> One dose on or after the 1 <sup>st</sup> birthday for students 3 and 4 years of age Two doses required with the first dose administered on or after the 1st birthday for students in K thru 12 <sup>th</sup> Grade	#1	#2	#3
<b>Hepatitis B Vaccine</b> Three doses are required for Pre K-12th Grade	#1	#2	#3
<b>Varicella (Chickenpox) Vaccine</b> One dose administered on or after the 1 <sup>st</sup> birthday or written verification of the disease for students ages 3 or 4 years of age Two doses for students in grades K thru 8 Grade	#1	#2	<b>Date of Disease</b>
<b>Hepatitis A Vaccine</b> Two doses on or after the 1st birthday for all pre-school students Two doses on or after the 1st birthday for all students in K through 6th grade	#1	#2	
<b>Haemophilus influenza type b (Hib) Vaccine</b> A primary series (2 doses 2 months apart) with a booster dose after 12 months of age or one (1) dose after 15 months of age	#1	#2	#3
	#4	#5	
<b>Pneumococcal Conjugate Vaccine</b> All pre-school students to 59 months of age	#1	#2	#3
	#4	#5	
<b>Meningococcal Vaccine</b> One dose for all students entering 7 <sup>th</sup> and 8 <sup>th</sup> grade	#1		

Physician's Signature/Clinic Stamp: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

## Texas Department of Health Immunization Requirements

Birth is not acceptable for recording 1<sup>st</sup> dose of Hepatitis B. Month /day /year are required for all immunizations  
Receipt of the dose up to (and including) 4 days before the birthday will satisfy school entry immunization requirements

Required Immunizations	Age Group	Required Number of Doses
Diphtheria-Tetanus-Pertussis (DTP) Diphtheria-Tetanus-acellular Pertussis (DtaP) Diphtheria-Tetanus (DT) Tetanus-Diphtheria (TD) DtaP will satisfy all DT requirements at all ages	Ages 3 and 4 years	Four (4) doses
	Entry into Kindergarten	Five (5) doses, unless the 4 <sup>th</sup> dose in the series was given on or after the 4 <sup>th</sup> birthday.
	7 years and older	Three (3) doses including 1 dose on or after 4 <sup>th</sup> birthday
	Entry into 7 <sup>th</sup> grade	One (1) booster dose of Tdap / Td booster if at least 5 years have passed since the last dose of tetanus containing vaccine was administered or when the 5 year interval has lapsed.
Polio Any combination of oral polio vaccine (OPV) and inactivated polio vaccine (IPV) acceptable	Ages 3 and 4 years	Three (3) doses
	Entry into Kindergarten Required grades K – 12	Four (4) doses, unless the 3 <sup>rd</sup> dose in the series was given on or after the 4 <sup>th</sup> birthday.
Haemophilus influenzae type b (Hib)	15 months thru 59 months Proof of Hib for children 5 years and older is not required	A primary series (2 doses, 2 months apart) with a booster dose (at least 2 months after the last dose) after 12 months of age Or One (1) dose on or after 15 months of age
Measles, Mumps, Rubella (MMR)	Required ages 3 and 4 years	One (1) dose on or after the 1 <sup>st</sup> birthday
	Entry into Kindergarten (2 <sup>nd</sup> dose) Required Kdg-12 <sup>th</sup> grade	Two (2) doses required with the 1 <sup>st</sup> dose administered on or after the 1 <sup>st</sup> birthday
Hepatitis A	Pre K Entry into Kindergarten – 6 <sup>th</sup> grade	Two (2) doses are required with the 1 <sup>st</sup> dose administered on or after the 1 <sup>st</sup> birthday
Pneumococcal Conjugate Vaccine	Pre K Required up to 59 months of age	Minimum of one (1) dose administered after the 1 <sup>st</sup> birthday
Hepatitis B	Required Pre K - 12 <sup>th</sup> grade	Three (3) doses are required
Varicella (Chicken Pox)	Required Pre K-12 <sup>th</sup> grade	One (1) dose administered on or after the first birthday or written verification of the disease.
	Entry into Kindergarten – 8 <sup>th</sup> grade	Two (2) doses
Meningococcal Vaccine	Entry into 7 <sup>th</sup> - 8 <sup>th</sup> grade	One (1) dose is required