### Immunization History

(Generated by a physician)

Note: Other legal documentation may be acceptable.

Name: __________________________________________________________________________________________________________________

Birth Date: ___________________________________________________________________

Social Security No. _______ - ______ - ________

Matriculated     Non-Matriculated Male    Female

Record of Immunization

| I. | Measles: First shot (After age 1 and given in or after 1969) | MONTH | DAY | YEAR |
|    |                                                               |       |     |      |
|    | Measles: Second shot (After 1980)                              |       |     |      |
|    | Rubella (German Measles)                                      |       |     |      |

| II. | Laboratory Verification (Blood Titre)                          | DATE | RESULTS |
|     |                                                               |       |         |
|     | Measles                                                         |       |         |
|     | Rubella (German Measles)                                       |       |         |

History of having rubella disease is not acceptable documentation of immunity.

If you have any questions about the requirement, please call our Health Service Office at 203 837-8594.

Note: A form is provided below for your physician to complete. No registration can be accepted until this requirement has been met.

### Important Information

**Measles/Rubella Legislation**

Connecticut Public Act #90 mandates the immunization of all public college/university students against measles and rubella (German measles). If you were born after 12-31-56, you must present proof of immunity.

**Measles:**

The law requires two doses of Measles vaccine with these guidelines:

1. Serological evidence of immunity, or
2. Immunization with LIVE measles vaccine administered
   a) First dose on or after 12 months of age and given in or after 1969
   b) Second dose given on or after 1-1-80

**Mumps:**

1. History of having had Mumps, or
2. Immunization with live mumps vaccine on or after 12-28-67

**Rubella (German Measles):**

1. Immunization with Rubella vaccine on or after 6-9-67
2. Immune by Rubella antibody titre and list titre value and date

History of having rubella disease is not acceptable documentation of immunity.

If you have any questions about the requirement, please call our Health Service Office at 203 837-8594.

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### Laboratory Verification (Blood Titre)

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<thead>
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Public Act No. 01-93

An act concerning meningitis information and vaccination for college students. Each public or private college shall require that each student who resides in on-campus housing be vaccinated against meningitis as a condition of such residence.