

Southern University Law Center Proof of Immunization Compliance (Louisiana R.S. 17:170 Schools of Higher Learning)

Name:	
	First) (Middle)
Social Security Number: XXX-XX Student I	Banner ID (U#):
Date of Birth: Month	DateYear
HEALTHCARE PROVIDER MUST COMPLETE	
COVID-19 One does of: Johnson & Johnson 2 doses of Moderna or Pfizer Circle Type: J&J Moderna Pfizer Booster Other Dose #1 Date: Dose #2 Date:	Tetanus-Diphtheria-Pertussis (DPT, DTP, DTaP, Tdap, TD) No Age Exemption At least 3 doses of diphtheria, tetanus and pertussis containing vaccine are REQUIRED. One MUST be a Tdap vaccine and have been administered within 10 years of the student's enrollment date. (Circle type: TD TDAP) Date:
MMR – Measles Mumps Rubella: (Two doses required) (Two doses of MMR at least 28 days apart after 12 months of age. Those born before 1957 are exempt.) MMR #1 Date MMR #2 Date Or provide copy of Serologic Test (Titer Results)	
MENINGOCOCCAL CONJUGATE VACCINE – Meningococcal meningitis is a potentially fatal, vaccine- preventable illness. The Meningococcal Conjugate Vaccine is REQUIRED for all students under the age of 22. A 2 nd vaccine MUST be given if the 1 st vaccine was given before age 16. If you have taken the Menomune Vaccine, it must be within the last 12 months. Meningitis – ACYW-135 (Circle Type: Menactra or Menveo)	
Date:	
(Provider's Signature) (Phone N	umber) (Date)

Request for Immunization Exemption: If you request an immunization exemption for medical or personal reasons, please circle your selection and provide the requested information.

- Medical (physician's statement required)
- **Personal** (state reason in space below)
- Religious Affiliation

STUDENT MUST COMPLETE

Southern University Law Center
Admission and Recruitment Department
P. O. Box 9294
Baton Rouge, Louisiana 70813

Phone: 225) 771-6297 / Fax: (225) 771-2372 IMPORTANT: Make a copy of this form for your personal records.

NOTE: You will not be permitted to register until all immunization records are in compliance.