

Immunization Information

On May 16, 1989, **Public Act 89-90: An Act Concerning Proof of Immunization Against Measles and Rubella for Certain Persons at Institutions of Higher Education** was signed into law. This act requires that any student enrolled in a course of study leading to a degree or graduate certificate who was born after Dec. 31, 1956, must provide **proof of immunization for measles and rubella**. The act further requires that the University exclude any student from enrollment or attendance without a certificate of immunization or other acceptable evidence of immunity to each disease.

For you to be enrolled or take classes after Jan. 1, 1990, it will be necessary for you to provide the University Health Center with one of the following:

A Certificate of Immunization

To demonstrate proper immunization against each disease, a student shall present the school with proof of immunization from a physician, nurse, or health official who has administered the immunizing agents to the student. The certificate shall specify the immunizing agent and the dates on which it was administered. (*The Fairfield University Health Center can provide immunizations; call (203) 254-4000, ext. 2241 for information.*)

OR

Proof of Immunity

To demonstrate that a student is immune to any of the diseases, the student shall provide the school with laboratory evidence demonstrating immunity.

The Act further defines adequate immunization for:

Measles: Two doses of measles vaccine administered at least one month apart. The first dose must have been administered at one year of age or older and after Jan. 1, 1969; the second dose must have been given after Jan. 1, 1980.

Rubella: One dose of rubella vaccine administered after the student's first birthday.

***Exceptions from this requirement are as follows:**

The student presents to the school a physician's written statement that immunization against one or more of these diseases is medically inadvisable. The physician's statement must specify the reasons the vaccine is contraindicated and that reason should be consistent with the U.S. Public Health Service Advisory Committee's statement regarding contraindications. If the statement does not include all diseases, the student must meet the immunization/immunity requirements for those diseases not covered by the statement.

OR

The student must present a statement in writing indicating an opposition to immunization because of a sincere religious belief.

Any student so exempted from these requirements will be excluded from attending classes for a specified period upon the documentation of a single case of measles or rubella occurring within the student body.

***There is NO exception for students applying to Nursing programs.**

Submit completed form to:
Fairfield University Health Center, 1073 North Benson Road, Fairfield, CT 06824

FAIRFIELD UNIVERSITY GRADUATE SCHOOL

Immunization Form

PLEASE PRINT OR TYPE

(TO BE COMPLETED BY APPLICANT)

STUDENT'S NAME (LAST, FIRST, M.I.)	DATE OF BIRTH	SEX
ADDRESS		SOCIAL SECURITY NUMBER OR STUDENT I.D. NUMBER

Please check the school to which you are applying:

- Charles F. Dolan School of Business
 College of Arts and Sciences
 School of Engineering
 School of Nursing
 Graduate School of Education and Allied Professions

Immunization History

(TO BE COMPLETED BY PHYSICIAN)

Adequate immunization as defined by the state of Connecticut:

(Please see reverse side for details)

Measles: Two doses of measles vaccine administered at least one month apart. The first dose must have been given after one year of age and after Jan. 1, 1969; the second dose must have been given after Jan. 1, 1980.

Rubella: One dose of vaccine, administered after the first birthday.

(German Measles)

**PROOF OF THE ABOVE IMMUNIZATIONS MUST BE SUBMITTED
OR LABORATORY PROOF MAY BE SUBMITTED.**

VACCINE TYPE	First dose (Mo/ Day/Yr)	Second dose (Mo/ Day/Yr)	Third dose (Mo/ Day/Yr)
MEASLES			
RUBELLA			

I certify that this student has received the immunization indicated.

Physician's signature

Date