Measles and Mumps Vaccine Requirement

Last Name          First Name          M.I.          Date of Birth

Pacific Northwest College of Art requires all incoming students to show evidence of immunity to measles (Rubeola) and mumps. Many students have only received one dose of Measles, Mumps, and Rubella vaccine (MMR), and therefore a booster dose of MMR vaccine must be obtained.

All entering students born after 1956 must have at least one of the following:

- Two vaccinations of MMR on or after their first birthday, with a minimum of 30 days between the first and second dose with physician's signature to verify immunization.
- Show evidence of immunity to measles (Rubeola) and mumps.
- Physician's signature certifying prior measles (Rubeola) and mumps.

Please indicate month and year of the last two vaccinations of MMR below along with physician's signature for verification:

<table>
<thead>
<tr>
<th>Month / Year</th>
<th>Month / Year</th>
<th>Physicians Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Physicians Address            Physicians Phone

Exemptions:

Age Exemption:
Please initial here if you were born before 1957: ______

Medical Exemption:
Acceptable reasons may include:

- Serious allergic reactions (anaphylactic) to eggs, Neomycin, or other vaccines.
- Pregnancy or intent on becoming pregnant within 28 days.
- Immuno-suppression such as occurs with cancers (leukemia, lymphoma) or medications for such diseases
- Taking high doses of cortisone-type medications for more than 2 weeks.

All medical exemptions require a physician's certification and signature:
I certify that this individual should be exempted from the MMR vaccine requirements based on:

| History of disease (provide year): Rubeola _______ Mumps _______ |
| Immune Titers: Rubeola: Result _______ Date: _______ Mumps: Result _______ Date _______ |
| The following medical reason: ____________________________________ |

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Physicians Address            Physicians Phone

Religious Exemption:
I have read and understand the above information. I am adherent to a religion, the teachings of which are opposed to immunization, and therefore request that I be exempted from the immunization requirement.

Signature          Date

**In the event of an outbreak, individuals with a religious or medical exemption for measles or mumps may be excluded from the college.**