

All students are required to submit immunizations under North Carolina Law unless:

Students reside off campus and are registered for any combination of:

- Off campus courses
- Evening courses (start at 5:00PM or later)
- No more than four traditional day credit hours in on-campus courses
- Weekend courses

IMPORTANT – The immunization requirements must be met; or according to NC law, you will be withdrawn from classes without credit.

Step 1 – Collect your immunization history

You may use the *Immunization Record Form* on page three (3) of this document to record your immunization history.

Please enter as much of your immunization information as possible.

This form will require a signature or clinic stamp from your physician or health department.

OR

You may submit other acceptable records as proof of your immunizations.

Those records may be obtained from of the following:

- North Carolina High School Records – These may contain some, but not all of your immunization information.
 - High school transcripts from other states are not considered acceptable documentation per NC Branch of Immunization Requirements.
- Previous College or University – **Your immunization records do not transfer automatically. You must request a copy.**
- Personal Shot Records – Must be verified by a doctor's signature or by a clinic or health department stamp.
- Military Records or WHO (World Health Organization) Documents – These records may not contain all of the required immunizations.
- State Immunization Registry Documents

Your records must include:

- Name
- Date of Birth
- Student ID Number (92#)
- Name and address of the physician or clinic that administered the immunization
- Month, Day & Year of Immunization

Step 2 – Determine your specific immunization requirements

North Carolina Required Immunizations

Hepatitis B Requirement

Three (3) shot series must be completed.

Students born before July 1, 1994 are not subject to this requirement.

Note that HIB is not the same as HEPB/HBV

MMR (Measles, Mumps, Rubella) Requirement* Live Virus**

2 MMR vaccines 28 days apart beginning on or after the 1st birthday

2 measles, 2 mumps and 1 rubella single dose OR

Documentation of (+) titer

Students born before 1957 are not subject to this requirement except in case of outbreak

These immunizations may include a combination of the following:

Titers are accepted with documentation by serological testing to have a protective antibody titer.

*Measles and Mumps vaccines are not required if any of the follow occur: an individual who has been documented by serological testing to have a protective antibody titer against measles and mumps and **submits the lab report**; An individual born prior to 1957; or Enrolled in college or university for the first time before July 1, 1994. An individual entering college or university prior to July 1, 2008 is not required to receive a second dose of measles or mumps vaccine. Rubella is not required if any of the follow occur: 50 years of age or older; Enrolled in college or university before February 1, 1989 and after their 30th birthday; An individual who has been documented by serological testing to have a protective antibody titer against rubella and **submits the lab report**.

Polio Requirement

Three (3) doses are required.

Students who have attained his or her 18th birthday is not subject to this requirement.

Diphtheria-Tetanus-Pertussis (DTP childhood series) and Tdap (Tetanus-Diphtheria-pertussis)

All students entering college on or after July 1, 2008 must have had three (3) doses of tetanus/diphtheria toxoid

One dose must be a Tdap

One dose recommended within the last 10 years

Varicella Requirement – Live Viruses**

One (1) dose of varicella vaccine if born after April 1, 2001 OR

Documented Disease by a provider OR

Documentation of (+) positive titer

Tuberculosis Screening

Required of international students or non-US Citizens.

Students from high-risk countries (as determined by CDC) may require a Tuberculin Skin Test (TST) or PPD

**Live Viruses must be given on the same day or 28 days apart, for example, MMR and varicella.

North Carolina Recommended Immunizations

Hepatitis A

Human Papillomavirus (HPV)

Three (3) shot series must be completed.
Specify Gardasil, Gardasil-9, or Cervarix.

Meningococcal

Specify Menactra, Menveo, Menomune, MPSV4, or MCV4.
Recommended booster after age 16.

North Carolina House Bill 825 requires public and private institutions with on-campus residents to provide information about meningococcal disease:

Pneumococcal

Learn why the American College Health Association recommends these additional Vaccines

Meningococcal - <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/mening.html>

Meningococcal B - <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/mening-serogroup.html>

HPV - <https://www.cdc.gov/vaccines/vpd/hpv/hcp/recommendations.html>

Yearly Flu Vaccine - <https://www.cdc.gov/flu/prevent/flushot.htm>

COVID-19 Vaccine

While the COVID vaccine is not required to attend WCU, if you have received a COVID vaccine and/or booster please submit proof of these with your other vaccination records

Step 3 – Submit your immunizations

Log-In to Health Services' online patient portal at wcu.medicatconnect.com.

Complete the data entry as instructed on the portal.

Upload all of your immunization documentation forms for verification and compliance by health services staff.

Important Note: You must have complete immunization information before registering for your class schedule.

Use this form if you do not have other proof of immunizations.

_____ / ____ / ____ _92
 Last Name First Name MI Date of Birth Student ID#

_____ _____ _____ _____
 Address City State Zip

REQUIRED IMMUNIZATIONS	MM/DD/YYYY	MM/DD/YYYY	MM/DD/YYYY	MM/DD/YYYY
Immunization Name	Dose 1	Dose 2	Dose 3	Dose 4
DTP/DTaP/Td				
Tdap Booster				
Polio				
Measles, Mumps, Rubella (MMR)				
Measles			Disease Date	Titer Date & Result
Mumps			Disease date not accepted	Titer Date & Result
Rubella			Disease date not accepted	Titer Date & Result
Hepatitis B (Required if born 7/1/94 or after)				
Varicella (Required if born on or after 4/1/01)			Disease Date	Titer Date & Result

Titers are accepted with documentation by serological testing to have a protective antibody.
 Must repeat Measles (Rubeolla) vaccine if received more than 4 days prior to 12 months of age. History or physician-diagnosed measles disease is acceptable, but must have signed statement from physician. History of rubella or mumps disease, even from a physician, is not acceptable.

RECOMMENDED IMMUNIZATIONS	MM/DD/YYYY	MM/DD/YYYY	MM/DD/YYYY	MM/DD/YYYY
Immunization Name	Dose 1	Dose 2	Dose 3	Dose 4
Received the meningococcal vaccine? <input type="checkbox"/> Menactra <input type="checkbox"/> Menomune <input type="checkbox"/> Menveo <input type="checkbox"/> MPSV4 <input type="checkbox"/> MCV4				
Hepatitis A				
Pneumococcal				
Hepatitis A series				
Human Papilloma Virus (HPV) <input type="checkbox"/> Gardasil <input type="checkbox"/> Gardasil-9 <input type="checkbox"/> Cervarix				

TUBERCULOSIS SCREENING
 Required of international students or non-US Citizens.
 Students from high risk countries (as determined by CDC) may require a Tuberculin Skin Test (TST) or PPD.
 Students with a positive skin test may be required to submit results from a recent chest x-ray.

SIGNATURE OR CLINIC STAMP REQUIRED:

 Signature of Physician/PA/NP

 Date

 Print Name of Physician/PA/NP

 Phone Number

 Office/Clinic Address City State Zip Code

Required immunizations must be entered by visiting our patient portal wcu.medicatconnect.com Upload all of your immunization documentation forms for verification and compliance by health services staff.

IMPORTANT – The immunization requirements must be met; or according to NC law, you will be withdrawn from classes without credit.