

CERTIFICATE MUST BE SUBMITTED TO WELLNESS CENTER BEFORE STUDENT'S FIRST DAY OF CLASS.

NOTE: Illinois law (TITLE 77 PART 694 COLLEGE IMMUNIZATION CODE) requires incoming students taking 6 or more credit hours to document immunity to tetanus/diphtheria, measles, rubella, and mumps.

The following rules will apply:

1. All dates must include Month, Day and Year.
2. Part II. Proof of immunity may be provided by a copy of the student's Certificate of Child Health Examination from an Illinois high school which provides the complete information necessary to assure compliance with the Act. The Certificate of Child Health Examination must be reviewed for compliance and attached to this form. Part III need not be completed.

RULES FOR ACCEPTABLE IMMUNIZATIONS AND BLOOD TESTS PROVING IMMUNITY:

3. Part III: must be completed and signed by a health care provider
(Physician licensed to practice medicine in all of its branches (M.D. or D.O.), a local health authority, registered nurse employed by a school, college, or university, or a Department recognized vaccine provider)
 - All laboratory evidence of immunity must be accompanied by a copy of the laboratory report.
 - History of rubella disease is not acceptable as proof of immunity.
 - All live virus vaccines must have been given on or after the first birthday.
 - Mumps titer is only acceptable as proof of immunity if the laboratory used was a neutralization, enzyme-linked immunosorbent assay (ELISA or EIA) or radial hemolysis antibody test. A four-fold rise in antibody titer between appropriately spaced acute and convalescent sera is also acceptable.

RULES FOR EXEMPTIONS:

4. Only the following exemptions will be accepted and statements must accompany this record:
 - Medical Contraindications-A written, signed, and dated statement from a physician stating the specific vaccine or vaccines contraindicated and duration or medical condition that contraindicated the vaccine(s).
 - Religious Exemption-A written, signed, and dated statement by the student (or parent /guardian if the student is a minor) describing his/her objection to immunization on the grounds that they conflict with the tenet and practices of a recognized church or religious organization, of which the student is an adherent or member.
 - Pregnancy or Suspected Pregnancy-A signed statement from a physician stating the student is pregnant or pregnancy is suspected and estimated date of confinement.
 - Students enrolled only in programs designated by the University as "Online Only".
5. **Anyone with a vaccine exemption may be excluded from the college/university in the event of a measles, rubella, mumps, or diphtheria outbreak in accordance with public health recommendations.**
6. **All records not in English must be accompanied by a certified translation.**

**WELLNESS CENTER, Dominican University, 7900 W. Division St. River Forest, IL 60305
(Ph) 708-524-6229 (Fax) 708-488-5072**