

Use required on or after July 1, 2010.

Tennessee Department of Health



CERTIFICATE OF IMMUNIZATION

Child's Name (Last name, first name, middle)

Birthdate (mm/dd/yy)

Parent/Guardian Name (Last name, first name, middle)

Phone (please include area code xxx-xxx-xxxx)

Address

City State Zip Code

Section 1a. Religious Exemption —

Check here if religious exemption to immunization selected by parent/guardian

1b. Health Examination Documentation (if required)

This child has been examined: MM / DD / YY

Certified by (Signature/Stamp)

1c. Check if needed

Dental Screening

Vision Screening

Unless specifically exempted by law, Tennessee law requires a certificate on file for each child in attendance in any school or child care facility in Tennessee. Detailed instructions for this form and explanation of requirements are in "Instructions for Completion of Immunization Certificates" and the "Official Immunization Schedule" at the Tennessee Department of Health website (<http://health.state.tn.us/CEPS/requirements.htm>) and on the Tennessee Web Immunization System.

VACCINE	DATE MM/DD/YY	DATE MM/DD/YY	DATE MM/DD/YY	DATE MM/DD/YY	DATE MM/DD/YY	DATE MM/DD/YY	Degreed (YY)	+SeroLogg (YY)	Entry (YY)	Medical Exemption (X)
Section 2a. Required Vaccines for School or Child Care Attendance (Dates Required)										
Hib Child Care Only (<6 years)										
Pneumococcal (PCV) Child Care Only (<6 years)										
DTP, DTap, DT, Td										
Poliomyelitis										
<input type="checkbox"/> Hepatitis B Check here if 11-16 years 2-dose schedule used								YY		
Hepatitis A Child Care Effective 7/2010 Kindergarten Effective 7/2011								YY		
Measles								YY		
Mumps								YY		
Rubella								YY		
Varicella							YY	YY	YY	
Tdap Booster 7th Grade Entry Only										

Section 2b. Recommended Vaccines (Documentation Optional)										
Rotavirus										
Influenza										
Meningococcal										
HPV										

Section 3. Provider Assessment (select one*, not valid if blank)

A) Temporary Certificate - Expires MM / DD / YYYY
Expiration date one month after date next catch-up immunization is due. —

B) Up to Date for Child Care Entry and <18 Months of Age
Only if requirements incomplete, but up to date for age. Expires at 18 months of age.

C) Complete for Child Care / Pre-School*
Fulfills all requirements for child care / pre-school or pre-K under 5 years of age. —

D) Complete K-6th Grade*
Fulfills requirements, Kindergarten through 6th grade.

E) Complete 7th Grade or Higher
Fulfills requirements, 7th grade or higher

**If age 4 years and fulfills requirements for Pre-School and Kindergarten, check BOTH Boxes C and D.*

Section 4. (Required) Printed or Stamped Name, Address, Phone of Qualified Healthcare Provider (MD, DO, PA, Advanced Practice Nurse or Health Department):

Certified by (Signature/Stamp) or Tenthis MM | DD | YYYY
Date of Issue