



Public Safety Immunization Record



In an effort to provide a safe and effective learning environment, SFSC's clinical partners have determined the following immunizations are optimal for the health and safety of our students.

Student Last Name	Student First Name	Middle Initial	Date of Birth

Proof of Tuberculin PPD Screening

	Date Administered	Date Read	Result	Qualified Signature
Tuberculin PPD Test (PPD Skin Test)				
Chest X-Ray (if positive skin test result)				

IMMUNIZATION RECORD:

Please check the appropriate boxes below and attach supporting documentation. If you have received vaccinations in the past, but do not have documentation, you must either have a titer test or sign the declination.

	Received Immunization	Have NOT Received Immunization	Titer	Childhood History	Declination Attached
Measles, Mumps, Rubella (MMR)					
Hepatitis B (Series)					
Hepatitis C					
DTP or TD/TD Booster Within 10 years					
Varicella (Chicken Pox) Titer Required					