

Three Rivers Community College State Immunization Policy

By law (Public Act 89-90), all higher education institutions in Connecticut require all full-time enrolled students and part-time matriculated students born after December 31, 1956 to submit evidence of immunization against MEASLES AND RUBELLA before permitting them to register for classes.

If you graduated from a public or private high school in the state of Connecticut AFTER 1998, you are exempt from this requirement when you provide proof of high school completion.

Name of Student _____

SS# _____ Birth Date _____ Phone # _____

OPTION 1

Document that you have received adequate vaccination. The documentation must clearly indicate that you have TWO doses of vaccine for MEASLES (administered at least one month apart). The first dose must have been administered on/after 01/01/69 (and after the student's first birthday). The second dose must have been administered on/after 01/01/80. ONE dose of RUBELLA vaccine administered after the student's first birthday is required.

MEASLES vaccine _____
(date of first dose) (date of second dose)

RUBELLA vaccine _____
(date)

Signature of physician or other (date)
Authorized medical personnel

(address)

OPTION 2

Document that you have already had these two diseases. If you cannot document a confirmed case of the disease(s), then you can submit immunity results from a medical laboratory test (titer test).

MEASLES

Confirmation of disease on _____
OR (date)

Positive titer test results on _____
(date)

RUBELLA

Confirmation of disease on _____
OR (date)

Positive titer test results on _____
(date)

Signature of physician or other (date)
Authorized medical personnel

(address)

OPTION 3

There may be a medical reason (e.g. pregnancy) which prohibits you from being vaccinated. If so, have your doctor write a statement to that effect.

Signature of physician or other (date)
Authorized medical personnel

(address)

OPTION 4

If inoculation is contrary to your religious beliefs or practices, submit a letter of explanation and attach verification from a clergy member.

_____ Religious exemption claimed, letter attached

NOTE: Students selecting OPTIONS 3 OR 4 may be excluded from classes and activities in the event of a measles or rubella outbreak.

**RETURN DOCUMENT TO ADMISSIONS OFFICE
PRIOR TO REGISTRATION**