

**University of Southern Maine
Immunization Verification**

**MAINE STATE LAW REQUIRES COLLEGE STUDENTS TO SHOW PROOF OF
IMMUNIZATION AGAINST MEASLES, MUMPS, RUBELLA (MMR) AND
TETANUS AND DIPHTHERIA (Td).**

****STUDENTS BORN BEFORE JANUARY 1, 1957 DO NOT NEED TO SUBMIT RECORDS****

STUDENTS HAVE 2 OPTIONS WHEN SUBMITTING THEIR RECORDS:

OPTION #1: HAVE YOUR HEALTH CARE PROVIDER COMPLETE THIS FORM BY
FILLING IN THE DATES OF YOUR VACCINATIONS AND SIGNING BELOW

OPTION #2: MAIL IN A COPY OF YOUR IMMUNIZATION RECORDS.

Student Name: _____

ID# _____ **DOB:** _____

REQUIRED VACCINATIONS: PLEASE FILL IN DATES

1. MMR (MEASLES, MUMPS, RUBELLA) AFTER STUDENT'S FIRST BIRTHDAY

MMR #1 ____/____/____

MMR #2 ____/____/____

2. Td (TETANUS, DIPHTHERIA) WITHIN THE LAST 10 YEARS OR
Tdap (TETANUS, DIPHTHERIA, PERTUSSIS) WITHIN THE LAST 10 YEARS

Td ____/____/____(WITHIN LAST TEN YEARS)

Tdap ____/____/____(WITHIN LAST TEN YEARS)

Signature and title of Health Care Provider: _____

Date: _____

PLEASE NOTE

In lieu of MMR vaccination records you may submit laboratory evidence of immunity to measles, mumps and rubella. Attach the lab reports to this form. Proof of Td vaccination is still required

Mail to:
Immunization Records
Shared Processing Center
PO Box 412
Bangor, ME 04402-0412
or Fax to: 207-561-3430