

# CERTIFICATE OF IMMUNIZATION

**PLEASE RETURN THIS FORM TO:**

Rowan College at Burlington County  
 Office of Outreach and Admissions  
 900 College Circle  
 Mount Laurel, NJ 08054-9416  
 admissions@rcbc.edu



*(Must be sent from your RCBC email address)*

**STUDENT INFORMATION**

Last 4 Digits of Social Security Number \_\_\_\_\_ or RCBC ID# \_\_\_\_\_

Date of Birth \_\_\_\_\_

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**IMMUNIZATION INFORMATION** *(See attached for specific immunization requirements.)*

Dates of Live Doses of Vaccines			
	1st	2nd	3rd
MMR			<b>X</b>
Measles			<b>X</b>
Mumps			<b>X</b>
Rubella			<b>X</b>
Hepatitis B			

**OR**

Laboratory Serology <i>(Blood Test)</i>	
	Date
Measles Titer	
Mumps Titer	
Mumps Diagnosis	
Rubella Titer	
Hepatitis B	

**CERTIFICATE OF HEALTHCARE PROVIDER**

- Student compliant with regulations
- Student not compliant with regulations

Physician's Name \_\_\_\_\_ Physician's Signature \_\_\_\_\_

Physician's License # \_\_\_\_\_

Date \_\_\_\_\_

**EXEMPTIONS**

**MEDICAL**

- This student is exempt from the above immunizations on the grounds of medical contraindication. *(Documentation from physician attached)*

**OTHER**

- I am exempt for religious reasons. *(Written statement from student or religious official attached)*
- I am exempt from the MMR immunization as I was born before 1957. *(Proof of birth date attached)*

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

# IMMUNIZATION REQUIREMENTS



The State of New Jersey requires that all full-time (12 or more credits), degree seeking students, provide proof of all required immunizations certified by a health official.

Students must submit official transcripts to the  
 Office of Outreach and Admissions  
 900 College Circle  
 Mount Laurel, NJ 08054  
 admissions@rcbc.edu  
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Vaccine	Requirement	Required for:
Measles	Two doses of live measles vaccine (combined Measles, Mumps, Rubella “MMR” meets this requirement), with the first dose at 12 months of age or after and second dose no less than one month after the first dose OR Laboratory/serologic evidence of immunity.	Students born 1957 or later
Mumps	One dose of live mumps vaccine at 12 months of age or after (MMR meets this requirement) OR Laboratory/serologic evidence of immunity.	Students born 1957 or later
Rubella	One dose of live rubella vaccine at 12 months or after (MMR meets this requirement) OR Laboratory/serologic evidence of immunity.	Students born 1957 or later
Hepatitis B	Three doses of hepatitis b series, or alternatively, any two doses of a hepatitis b vaccine licensed and approved for a two dose regimen, administered to the student between 11 through 15 years of age OR Laboratory/serologic evidence of immunity prior to infection.	All students