***All information disclosed on this form will be kept confidential and will be shared with appropriate College personnel on a need-to know basis only.**

OREGON INSTITUTE OF TECHNOLOGY
Integrated Student Health Center
3201 Campus Drive Klamath Falls, Oregon 97601
Phone: 541-885-1800

☐ **Portland Student**

Name _____ **Date of Birth** _____ **Student ID# 918-**_____

IMMUNIZATION RECORD

REQUIRED VACCINES

- Measles/Mumps/Rubella — Date 1st dose: ___/___/___
  Date 2nd dose ___/___/___

Documentation is required for these immunizations. Accepted documentation (copies are acceptable) is:

- Doctor's office or medical clinic records
- Public Health Department records
- Personal immunization card which is signed by clinic staff
- Your high school or previous college immunization records
- Serological Confirmation of Immunity: Lab test (titer) for Measles, Mumps, and Rubella may be substituted as proof of immunity in lieu of vaccinations. Copies of lab work must be attached.

If the information submitted regarding MMR vaccinations is incomplete or insufficient, a hold will be placed on future terms of registration. OIT Student Health does have this vaccination available.

You may refer to "Health Center" in the OIT Catalog for more information.

International students must have at least one documented MMR vaccine on file at the Student Health Center PRIOR to the student attending any classes.

RECOMMENDED VACCINES

♦ Hepatitis A/B — Date 1st dose ___/___/___; Date 2nd dose ___/___/___; Date 3rd dose ___/___/___

OR

♦ Hepatitis B — Date 1st dose ___/___/___; Date 2nd dose ___/___/___; Date 3rd dose ___/___/___

♦ Hepatitis A — Date 1st dose ___/___/___; Date 2nd dose ___/___/___

♦ Varicella (Chicken Pox) — Date 1st dose ___/___/___; Date 2nd dose ___/___/___

♦ Meningicoccal ___/___/___

♦ Gardasil (HPV) — Date 1st dose ___/___/___; Date 2nd dose ___/___/___; Date 3rd dose ___/___/___

♦ Tetanus Booster ___/___/___

Did it contain Pertussis? Yes/ No/Unknown

* OIT Student Health Center offers most of these vaccines.

Tuberculosis (TB) Screening: Students from countries identified as high risk for Tuberculosis are required to complete a TB screening upon entrance to OIT. This may include a TB skin test and/or a chest x-ray. Please come to the Student Health Center to fulfill this requirement.

Office Use

Date Reviewed ___/___/___
Reviewed By _____
Cleared? _____
Health Hold? YES NO

STUDENT SIGNATURE:_____ **DATE:** _____

This form must be on file in The Student Health Center. Please complete, print and return to the Integrated Student Health Center, Semon Hall, Room 138. Please check our website http://www.oit.edu/health for services provided by the Student Health Center on the Klamath Falls campus. For questions, please call (541) 885-1800.