		3231
	CERTIFICATE OF IMMUNICATION	ting both boxes:
	Chic's Name (Lask name first) Britains Date of Expreti	one or the other
		lete for School"
	The second secon	
		or child under age 4
	VACCINE DATE DATE DATE DATE DATE DATE DATE	ntus name
	Required Ventries Int School 9: No dose DTaP after 4 th birthday	
	2: Doses Hep B	spaced incorrectly
	reportes 8	
	Mor ap 1	
7: 1st dose MMR giv	ven before age 1 vr.	H
TT TOU WOOD IIIIII G.		H
	Papelle A S. Vo	ricella Immunity not
6: 1st dose varicella	a divon hotoro ado 1 vr	•
	viernation Gright GOCU	mented by vaccine or
9: No 2nd doco	varicella documented hx/dx	k/serology date
o. No znu dose	varicena documented	
	mana	
	To or Topo desire from	
	and in case of regard enteriors provided Enterior Control of Control of Control States	s and/or contact on not completed

- 10. "Complete for School" checked for child under age 4.
- 9. No DTP/DTaP/DT given on or after the 4th birthday.
- 8. No 2nd dose of varicella documented.
- 7. 1st dose MMR given before age 1 yr.
- 6. 1st dose varicella given before age 1 yr.
- 5. Varicella immunity not documented. A vaccine administration date, or a 4 year digit in the box for diagnosed/serology/history is required.
- 4. Address and/or contact information not completed.
- 3. Writing in an expiration date **AND** checking the "Complete for School Attendance" box. It should be one or the other. The most common mistake is that some providers fill in the date for the Tdap/Td booster here. Students in Georgia are encouraged but not routinely required to have this booster.
- 2. Doses of Hepatitis B spaced incorrectly. Frequently the 3rd dose is given before 24 wks. of age, the absolute minimum age.
- 1. No physician signature. By law, the form must be signed by a physician licensed in GA, or by public health personnel, or state immunization program personnel. A physician's signature along with the signature of the person completing the form, is acceptable. Lone signatures of Physician Assistants, nurses, or Nurse Practitioners are not acceptable.