VERMONT
DEPARTMENT OF HEALTH

GRADE:_____

SCHOOL YEAR:_____

Student's Name	Date of Birth	DTaP	Medical	Religious	Provisional Admittance	Polio	Medical	Religious	Provisional Admittance	MMR	Medical	Religious	Provisional Admittance	Hepatitis B	Medical	Religious	Provisional Admittance	Varicella	Medical	Religious	Provisional Admittance	Tdap	Medical	Religious	Provisional Admittance	Meningococcal dorm students	Medical	Religious	Provisional Admittance	Medical	Religious	Provisional Admittance	NOTES
			DTaP reason				Polio reason				MMR reason				Hep B reason				Varicella reason				Tdap reason				MCV reason			Students with signed Exemption or Provisional Admittance form			
Joe Smith (example)	1/5/2011									1			1					1			1											1	Missing/Prov FM 9/15/16, TC ML 9/30, 10/1, 10/2. Exclude/Prov FM 10/7/16
Al Jones (example)	2/9/2011	1			1	1			1	1			1	1			1	1			1											1	New transfer, records requested 10/1/16
Kay Miller (example)	3/10/2011									1		1		1		1															1		Religious exemption form submitted 2016-17
totals		1	0	0	1	1	0	0	1	3	0	1	2	2	0	1	1	2	0	0	2	0	0	0	0	0	0	0	0	0	1	2	

Instructions:
- Use a separate sheet for each grade
- Only list students who do not meet vaccine requirements
- Delete provisionally admitted students from the list when all vaccine doses are received
- Indicate missing vaccine and reason with the number "1" (don't use an X) in order to have excel calculate totals for the Annual Immunization Status Report
- Indicate missing vaccine reason for each vaccine and also in the end columns (AE - AG)
- Students with a signed exemption form should remain on the list

FM = form mailed
TC = ttelephone call
ML = message left

PROVISIONAL AND EXEMPT STUDENTS - use this less detailed sheet for Grades 2-6, 9-12, and College reporting

VERMONT

DEPARTMENT OF HEALTH

GRADE:_____

SCHOOL YEAR:_____

Student's Name	Date of Birth	Missing Vaccine							Students with signed Exemption or Provisional Admittance form			NOTES
		DTaP	Polio	MMR	Hepatitis B	Varicella	Tdap	Meningococcal dorm students	Medical	Religious	Provisional Admittance	
Maria Smith (example)	1/6/2003						1				1	Missing/Prov FM 9/15/16, TC ML 9/30, 10/1, 10/2. Exclude/Prov FM 10/7/16
Eli Jones (example)	2/10/2003	1	1	1	1	1	1				1	New transfer, records requested 10/8/16
Nora Miller (example)	3/11/2003			1		1				1		Religious exemption form submitted 2016-17
totals		1	1	2	1	2	2	0	0	1	2	

Instructions:

- Use a separate sheet for each grade
- Only list students who do not meet vaccine requirements
- Delete provisionally admitted students from the list when all vaccine doses are received
- Indicate missing vaccine and reason with the number "1" (don't use an X) in order to have excel calculate totals for the Annual Immunization Status Report
- Indicate missing for each vaccine and also in the end columns (J,K,L)
- Students with a signed exemption form should remain on the list

FM = form mailed

TC = ttelephone call

ML = message left