

KINDERGARTEN FALL REPORT

School Year:

Phone Number:

Completed By (Name and Title):

School:

Email address:

PART 1: TOTAL NUMBER OF KINDERGARTEN STUDENTS ENROLLED _____

PART 2: EXEMPTIONS

| Vaccine | Medical | Religious | Personal | Total Exemptions |
|---|---------|-----------|----------|------------------|
| A. Total number of kindergartners who claimed an exemption (total number of exemption forms you have) | | | | |
| B. DTap, DTP, or Td | | | | |
| C. Polio | | | | |
| D. MMR | | | | |
| E. Hepatitis A | | | | |
| F. Hepatitis B | | | | |
| G. Varicella | | | | |

2H. NUMBER OF STUDENTS WHO CLAIMED AN EXEMPTION FOR ALL VACCINES _____

2I. NUMBER OF STUDENTS WHO HAVE BOTH A RECORD OF VACCINATION AND AN EXEMPTION _____

2J. TOTAL NUMBER OF STUDENTS THAT HAVE NEITHER DOCUMENTATION OF VACCINATION NOR DOCUMENTATION OF EXEMPTION (STUDENTS WITH NO RECORDS) _____

PART 3A: HOW MANY STUDENTS ARE CONDITIONALLY ENROLLED? _____

Students who did not provide the school with immunization records or provided incomplete immunization records at the time of enrollment)

HOW MANY STUDENTS ARE ON EXTENDED CONDITIONAL ENROLLMENT BECAUSE:

3B. More time is medically recommended to complete all required vaccine doses _____

3C. School principal or administrator and a school nurse, a health official, or a health official designee agreed that an additional extension will likely lead to compliance with school immunization record requirements during the additional extension period _____

3D. Total number of students who are on extended conditional enrollment (sum of 3A, 3B, and 3C) _____

PART 4: NUMBER OF NON-COMPLIANT KINDERGARTEN STUDENTS _____

Examples: students who lack immunization records, lack an exemption form, have an incomplete record, etc. after the conditional period has ended

PART 5: HOW MANY STUDENTS HAVE PROOF OF HISTORY OF DISEASE FOR ANY OF THE FOLLOWING VACCINES?

- a. DTaP _____
- b. Polio _____
- c. MMR _____
- d. Hep A _____
- e. Hep B _____
- f. Varicella (chicken pox) _____
- g. Total number of students with past history of disease _____

PART 6: HOW MANY STUDENTS HAVE RECEIVED ALL DOSES OF EACH REQUIRED VACCINE FOR SCHOOL ENTRY? _____

PART 7: BREAKDOWN OF CONDITIONAL AND/OR EXTENDED CONDITIONAL ENROLLMENT AND/OR NON-COMPLIANT STUDENTS

- a. Students with less than the required number of **DTP/DTap or Td** vaccine _____
- b. Students with less than the required number of **polio** vaccine _____
- c. Students with less than the required number of **MMR** vaccine _____
- d. Students with less than the required number of **hepatitis B** vaccine _____
- e. Students with less than the required number of **varicella** vaccine _____
- f. Students with less than the required number of **hepatitis A** vaccine _____

7G. TOTAL NUMBER OF STUDENTS WITH NO IMMUNIZATION RECORDS _____

7H. TOTAL NUMBER OF STUDENTS WHO CLAIMED THEY HAVE AN EXEMPTION, BUT DID NOT TURN IN THEIR EXEMPTION CERTIFICATE _____

7I. TOTAL NUMBER OF STUDENTS WHO CLAIMED A HISTORY OF DISEASE, BUT DID NOT SUBMIT PROOF OF IMMUNITY? _____

PART 8: NUMBER OF STUDENTS WHO HAVE NEITHER DOCUMENTATION OF VARICELLA VACCINATION OR HISTORY OF CHICKENPOX _____

PART 9: Gives a breakdown of the number of students who are up to date with each vaccine (should be populated automatically)

PART 10: HOW MANY STUDENTS ARE ENROLLED IN SCHOOL UNDER MCKINNEY-VENTO ACT AND LACK COMPLETE VACCINATIONS OR ARE MISSING RECORDS _____