

Dear Parent/Guardian,

The Arkansas State Board of Health requires that every child: be in compliance with the required vaccines, be in process of receiving necessary doses listed, show proof of immunity, or show proof of application to receive an exemption for those vaccines he/she has not received. In order to maintain attendance at Arkansas Christian Academy, the school nurse must have proof of the required doses by August 13th of the current school year. Please contact the nurse for any assistance regarding vaccination compliance.

| Vaccine | Required Vaccine Doses Missing Doses Marked | | | | Description |
|----------------------------|---|-------------------------------|----------|----------|---|
| Polio | Dose 1 | Dose 2 | ☐ Dose 3 | Dose 4 | 3 OR 4 doses with last dose after the 4 th birthday |
| DTaP | □ Dose 1 | Dose 2 | ☐ Dose 3 | ☐ Dose 4 | 4 doses with 1 dose on or after 1 st birthday. 3 doses for students 7 yrs or older who are not fully vaccinated |
| MMR | □ Dose 1 | □Dose 2 | | | 2 doses with first on or after 1 st birthday and second at least 28 days after 1 st dose |
| Нер В | Dose 1 | Dose 2 | Dose 3 | | 3 doses with last dose at least after 6 months of age |
| Varicella (Chicken Pox) | Dose 1 | Dose 2 | | | 2 doses with 1 dose on or after 1st birthday and at least 28 days after dose 1 Or a Medical Professional history of disease may be accepted |
| MCV4 Meningococcal | Dose 1 At age 12 by Sep 1 st or prior to 7 th grade. | Dose 2 At age 16 by Sep 1st | | | If first dose is administered at age 16yrs or older no second dose is required |
| TDAP | Dose 1 | | | | At age 11yrs by September 1 st of each calendar year |

^{*}Medical Professional is considered a physician, PA, PO, or APN. We can no longer accept "History of Disease" written on a previous shot record.

*Any student not wishing to receive any of the vaccines may request an exemption form from the Arkansas Dept. of Health. It is the

Parent/Guardian's responsibility to obtain the proper form and renew it yearly.