



The University of North Carolina Wilmington

Notice of Immunization Deficiency

Date _____

Student _____

It is important that you provide all required information within 30 days. Failure to meet all immunization requirements will result in your classes being dropped.

North Carolina General Statutes 130A-152 through 157 requires that you present documentation of the following immunizations in order for your immunization status to be complete.

- _____ DTP series (Diphtheria-Tetanus-Pertussis) – 3 dose series
- _____ Tetanus Booster within the past 10 years. For students receiving a booster after July 1, 2008 this must be Tdap (Tetanus-Diphtheria-Pertussis) rather than Td
- _____ Polio series – required if student is under 18
- _____ Measles – 1st dose was before 1st birthday, must be repeated *
- _____ Measles – 2nd dose required *
- _____ Mumps – 1st dose was before 1st birthday, must be repeated *
- _____ Mumps – 2nd dose required *
- _____ Rubella – dose was before 1st birthday, must be repeated *

_____ Meningitis – please indicate whether you have received the meningitis vaccination and return this form to the Student Health Center

- Yes Please send record. Record must include provider signature.
- No Signature _____ Date _____

_____ Immunization record must be signed by a physician/physician assistant/nurse practitioner or include the clinic stamp with address and phone number

_____ Other _____

* a blood test (titer) showing immunity is acceptable

If you have any questions concerning your immunization status, please call the Student Health Center at 910-962-3280.

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