

**NOTICE OF REQUIREMENTS FOR SCHOOL ATTENDANCE:**  
**2020 – 21 NC HEALTH ASSESSMENT AND IMMUNIZATIONS** (rev. 1/27/2020)

**Physical Exam/Health Assessments:** Parents/guardians must submit a completed NC Health Assessment Transmittal Form for each child who is presented for admission to a N.C. public school for the first time unless there is a written religious exemption on file. The Health Assessment may be no more than 12 months old at the time of program entry. (General Statute 130A-440; 10A NCAC09.3005)

**Immunizations/Vaccines:** For school attendance, parents/guardians must ensure that their child has received the required immunizations at the age required by law unless there is a written medical or religious exemption on file. (General Statute 130A-152-157)

<b>2020-21 Immunization Requirements by Grade</b>	
<p>This table provides general information about school immunization requirements. <i><b>Some immunizations require exact spacing between doses or age requirements that are not noted here.</b></i> If you have questions, contact your doctor's office or the nurse at the school where your child will attend.</p> <p style="text-align: center;">See N.C. Administrative Code 10A NCAC 41A.0401 for details.</p>	
<p><b>Pre-K</b></p> <p>4 DTP/DTaP/DT</p> <p>3 Polio</p> <p>1 - 4 Hib (Note: Dose # depends on vaccine type and age when vaccinated)</p> <p>3 Hepatitis B</p> <p>1 MMR</p> <p>1 Varicella (2<sup>nd</sup> dose required between 4-6 years old)</p> <p>1 - 4 Pneumococcal (Note: Dose # depends on age when vaccinated)</p>	<p><b>Grades K – 6</b></p> <p>5 DTP/DTaP/DT/Td</p> <p>4 Polio (Note: 4<sup>th</sup> dose on or after 4<sup>th</sup> birthday as of 7/1/15)</p> <p>1 - 4 Hib (Note: Dose # depends on vaccine type and age when vaccinated; not required after the age of 5 yrs.)</p> <p>3 Hepatitis B</p> <p>2 MMR</p> <p>2 Varicella (2<sup>nd</sup> dose required for all children entering school for the first time on or after July 1, 2015)</p> <p>1 - 4 Pneumococcal (Note: # of doses depends on age when vaccinated; not required after the age of 5 yrs. or if born before 7/1/15)</p>
<p><b>Grades 7</b></p> <p>5 DTP/DTaP/DT/Td/Tdap</p> <p>4 Polio</p> <p>3 Hepatitis B</p> <p>2 MMR</p> <p>1 Varicella (if born on or after 4/1/2001)</p> <p>1 Tdap</p> <p>1 Meningococcal</p>	<p><b>Grades 8 – 12</b></p> <p>5 DTP/DTaP/DT/Td/Tdap</p> <p>4 Polio</p> <p>3 Hepatitis B</p> <p>2 MMR</p> <p>1 Varicella (if born on or after 4/1/2001)</p> <p>1 Tdap</p> <p>1 - 2 Meningococcal* (<i>please see note below</i>)</p>
<p><small>*NC now requires two doses of Meningococcal conjugate vaccine (MCV). One dose is required for individuals entering the seventh grade or by 12 years of age, whichever comes first, on or after July 1, 2015. A booster dose is required for individuals entering the 12th grade or by 17 years of age, whichever comes first. Individuals who entered seventh grade before July 1, 2015 are not required to receive the first dose. The booster dose does not apply to individuals who entered the 12th grade before August 1, 2020. If the first dose is administered on or after the 16th birthday, a booster dose is not required. Individuals born before January 1, 2003 shall not be required to receive meningococcal conjugate vaccine.</small></p>	
<p><b>I have been informed that my child's immunization record and/or health assessment is due on or before their first day of school. I understand that my child will be excluded from school if the required documentation is not received within 30 days of starting school.</b></p> <p>Child's/Student's Name: _____ Date of Birth: _____</p> <p>Parent/Guardian Signature: _____ Date: _____</p> <p><b><i>After your child receives any required immunizations and/or the health assessment, please bring an updated record to school.</i></b></p>	

*Office Instructions: Give copy to parent/guardian. Attach original to orange card and place in student's cumulative folder.*