2020 Immunization Requirements

Commonwealth of Massachusetts and Harvard University regulations require students attending Summer School while in the United States on visas of any kind, including the visa waiver program or similar entry programs established between the U.S. and other foreign countries, and all students (including US citizens) who will be living in Summer School housing to be immunized against certain communicable diseases. To comply, please have this 2020 Immunization Form completed by your health care provider or medical records official and submit it by uploading in Online Services (Document Management).

The only circumstances under which a student may be exempted from these regulations are as follows:

- The student provides written certification by an examining physician that the student’s health would be endangered by one or more of the immunizations. In this case, the student must submit laboratory evidence of immunity to measles, mumps, rubella, and varicella (chickenpox); if the student is not immune, the student will be excluded from classes in the event of an outbreak; OR
- The student provides a signed written statement that the required immunizations would conflict with his or her religious beliefs. It is recommended that he or she present evidence of immunity through laboratory testing as above. Otherwise the student will be excluded from classes in the event of an outbreak. Please note: parents (including parents of minors) may not submit requests for religious exemptions on behalf of the student. The student must provide a signed statement on his or her own behalf.

Frequently Asked Questions

What if I don’t submit a complete immunization record before I arrive at Harvard?

We strongly encourage you to receive any required immunizations before you arrive at Harvard, as many health insurance plans will cover the costs of immunizations. If you are unable to obtain these prior to your arrival on campus, you may arrange to get immunizations at various locations in the area. If you have not demonstrated compliance with Massachusetts and Harvard University immunization requirements by the deadline, you will receive further instructions when you arrive at opening weekend check-in, and you will be required to report to Harvard University Health Services (HUHS); **wait times are two hours or more.**

What if I don’t have enough time to complete the full series of the MMR, Hepatitis B, or Varicella vaccinations?

For immunizations requiring more than one inoculation (such as measles, rubella, mumps, hepatitis B, and varicella), you must submit proof that you have begun the series and had as many of the inoculations (shots) as possible within the time frame/schedule specified on the Summer School Immunization Form. In this case, you are considered to be in compliance with the requirements for the current summer term.

My mother knows the dates I received my shots. Can she sign the form?

All immunization documentation and information must be certified by a health care provider or a medical records official. We cannot accept self-reported immunization information.

Can I submit a form from another school or from my Au Pair program instead of the Summer School Immunization Form?

You may submit alternate documentation such as a copy of your immunization records from another school you attended or a copy of your personal immunization card. This documentation **MUST** satisfy the following requirements:

- It must be in English.
- It must include the full dates of each immunization (i.e. month, day, and year).
- It must be certified by a health care provider or medical records official.
- It must demonstrate compliance with the Massachusetts and Harvard University immunization regulations.

Alternate documentation that does not fulfill these requirements will not be accepted.

What if my doctor does not know the exact date I received the shot or does not have record of it?

Without the full dates of your vaccinations (including month, day, and year), your immunization history does not comply with Massachusetts and Harvard University regulations and your documentation cannot be accepted. If you cannot provide documentation of each required immunization, there are several of the diseases for which you can have a blood test that will show whether or not you are immune to them (measles, mumps, rubella, hepatitis B, and varicella). You would need to provide the Summer School with the proof of such tests. For the diseases that do not allow blood tests, you must take the immunizations again and provide the proof.

Do I need to complete a whole new form to submit my additional/updated shot information?

You should submit a new form, but should include only the **NEW** information. Check the box marked, “I have new information to add to the form I submitted earlier this summer.” Lastly, the signature of your health care provider or medical records official cannot be earlier than the date of your most recent vaccination in order for your form to be accepted.

How do I know if you have accepted my documentation and completed the requirement?

Check the status of your immunization certification by logging in to online services at [www.summer.harvard.edu/login/](http://www.summer.harvard.edu/login/) and choose Student Information and Status from the main menu.

I’m at school all day. Is it OK if my mother/father calls to find out which shots I’m missing?

The Family Educational Rights and Privacy Act (FERPA), prohibits us from sharing this type of information with anyone except you, the student. You may check the status of your immunization certification by logging in to online services at [www.summer.harvard.edu/login/](http://www.summer.harvard.edu/login/) and choose Student Information and Status from the main menu.

Please submit this form by uploading in Online Services (Document Management) as soon as possible and no later than Friday, May 22, 2020.

Please keep a copy of this form for your own records.
# 2020 Immunization Form

Please clearly print all information.

<table>
<thead>
<tr>
<th>STUDENT FULL LEGAL NAME (exactly as printed on your passport or other government-issued photo identification)</th>
<th>DCE ID NUMBER (if known)</th>
<th>HARVARD ID NUMBER</th>
<th>DATE OF BIRTH example:</th>
<th>GENDER</th>
</tr>
</thead>
<tbody>
<tr>
<td>First/Given name(s)</td>
<td>Middle name(s)</td>
<td>Month (MMM) Day(DB) Year (YYYY)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(see <a href="http://www.summer.harvard.edu/login">www.summer.harvard.edu/login</a> if unsure)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Required immunizations**: Please record the date of immunizations or blood tests. Please print clearly.

- If this is the first time I am submitting this form this summer.
- If I have new information to add to the form I submitted earlier this summer.

(Students: Please circle the information that is new. Do not resubmit this form unless you have new information.)

### Measles–Mumps–Rubella (MMR)
TWO immunizations on or after the first birthday, at least 1 month* apart, in 1967 or later (combined as MMR or separately)

If administered separately, record below:

<table>
<thead>
<tr>
<th>Measles (Rubella)</th>
<th>Mumps</th>
</tr>
</thead>
<tbody>
<tr>
<td>TWO immunizations as described above</td>
<td>TWO immunizations as described above</td>
</tr>
</tbody>
</table>

### Exemption from MMR immunization only if:
A positive serological test (titer) for immunity to any of the above diseases is acceptable instead of immunizations (a history of the disease is not acceptable):

- Dates required: Pos MEASLES titer: ____ /____ /______ OR Pos RUBELLA titer: ____ /____ /______ OR Pos MUMPS titer: ____ /____ /______ OR Age at infection:______ OR Date of disease: ____ /____ /______

### Varicella (Chickenpox).
TWO immunizations on or after the first birthday, at least 1 month* apart, on 01-MAR-1995 or later

### Exemption from Varicella immunization only if:
A positive serological test (titer) for immunity to Varicella or a certified history of the disease is acceptable instead of immunizations:

- Dates required: Pos VARICELLA titer: ____ /____ /______ OR Age at infection:______ OR Date of disease: ____ /____ /______

### Tetanus-Diphtheria-Pertussis.
One dose of "Tdap" on 01-JAN-2011 or later. Vaccine must be Adacel, Boostrix, or ADULT ACELLULAR pertussis booster. No other vaccines can be accepted.

### Hepatitis B.
Three immunizations, the first and second of which must be at least 1 month* apart; the third must be at least two months* after the second and four months* after the first.

If Twinrix, check here:  

### Meningococcal Disease.
One immunization, within the last 5 years. Harvard requires this immunization for all students born after 01-JUL-1997 living in Summer School housing. ACWY vaccine ONLY. B variety vaccines do not meet the requirement.

Other students may waive this requirement by signing and submitting the waiver form along with this form.

- I am waiving the requirement for the Meningococcal vaccine because I will not live in Summer School housing, or because I was born before 01-JUL-1997.
- I have signed and attached the state waiver form.

### Strongly recommended test:

#### Tuberculosis.
Please provide results of tuberculin skin test (TST). Include measurement in millimeters of the induration and indicate positive or negative diagnosis.

<table>
<thead>
<tr>
<th>Induration size: mm</th>
<th>Date read:</th>
<th>Diagnosis at time of reading:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>____ /____ /______</td>
<td></td>
</tr>
</tbody>
</table>

### HEALTH CARE PROVIDER OR MEDICAL RECORDS OFFICIAL

<table>
<thead>
<tr>
<th>Last/Family/Sur name(s)</th>
<th>First/Given name(s)</th>
<th>Middle name(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephone number (including area/country code)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### REQUIRED SIGNATURE OF HEALTH CARE PROVIDER OR MEDICAL RECORDS OFFICIAL

<table>
<thead>
<tr>
<th>DATE (must be on or after most recent vaccination/test date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>____ /____ /______</td>
</tr>
</tbody>
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* One month = 28 days

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Information about Meningococcal Disease, Meningococcal Vaccines, Vaccination Requirements and the Waiver for Students at Colleges and Residential Schools

Colleges: Massachusetts requires all newly enrolled full-time students 21 years of age and under attending a postsecondary institution (e.g., colleges) to: receive a dose of quadrivalent meningococcal conjugate vaccine on or after their 16th birthday to protect against serotypes A, C, W and Y or fall within one of the exemptions in the law, discussed on the reverse side of this sheet.

Residential Schools: Massachusetts requires all newly enrolled full-time students attending a secondary school who will be living in a dormitory or other congregate housing licensed or approved by the secondary school or institution (e.g., boarding schools) to receive a dose of quadrivalent meningococcal conjugate vaccine to protect against serotypes A, C, W and Y or fall within one of the exemptions in the law, discussed on the reverse side of this sheet.

The law provides an exemption for students signing a waiver that reviews the dangers of meningococcal disease and indicates that the vaccination has been declined. To qualify for this exemption, you are required to review the information below and sign the waiver at the end of this document. Please note, if a student is under 18 years of age, a parent or legal guardian must be given a copy of this document and must sign the waiver.

What is meningococcal disease?
Meningococcal disease is caused by infection with bacteria called Neisseria meningitidis. These bacteria can infect the tissue that surrounds the brain and spinal cord called the "meninges" and cause meningitis, or they can infect the blood or other body organs. Symptoms of meningitis may appear suddenly. Fever, severe and constant headache, stiff neck or neck pain, nausea and vomiting, and rash can all be signs of meningitis. Changes in behavior such as confusion, sleepiness, and trouble waking up can also be important symptoms. In the US, about 1,000-1,200 people get meningococcal disease each year and 10-15% die despite receiving antibiotic treatment. Of those who live, another 11-19% lose their arms or legs, become hard of hearing or deaf, have problems with their nervous systems, including long term neurologic problems, or suffer seizures or strokes.

How is meningococcal disease spread?
These bacteria are passed from person-to-person through saliva (spit). You must be in close contact with an infected person’s saliva in order for the bacteria to spread. Close contact includes activities such as kissing, sharing water bottles, sharing eating/drinking utensils or sharing cigarettes with someone who is infected; or being within 3-6 feet of someone who is infected and is coughing or sneezing.

Who is at most risk for getting meningococcal disease?
High-risk groups include anyone with a damaged spleen or whose spleen has been removed, those with persistent complement component deficiency (an inherited immune disorder), HIV infection, those traveling to countries where meningococcal disease is very common, microbiologists who work with the organism and people who may have been exposed to meningococcal disease during an outbreak. People who live in certain settings such as college freshmen living in dormitories and military recruits are also at greater risk of disease from some of the serogroups.

Are some students in college and secondary schools at risk for meningococcal disease?
College freshmen living in residence halls or dormitories are at an increased risk for meningococcal disease caused by some of the serotypes contained in the quadrivalent vaccine, as compared to individuals of the same age not attending college. The setting, combined with risk behaviors (such as alcohol consumption, exposure to cigarette smoke, sharing food or beverages, and activities involving the exchange of saliva), may be what puts college students at a greater risk for infection. There is insufficient information about whether new students in other congregate living situations (e.g., residential schools) may also be at increased risk for meningococcal disease. But, the similarity in their environments and some behaviors may increase their risk.

The risk of meningococcal disease for other college students, in particular older students and students who do not live in congregate housing, is not increased. However, quadrivalent meningococcal vaccine is a safe and effective way to reduce their risk of contracting this disease. In general, the risk of invasive meningococcal B disease is not increased among college students relative to others of the same age not attending college. However, outbreaks of meningococcal B disease do occur, though rarely, at colleges and universities. Vaccination of students with meningococcal B vaccine may be recommended during outbreaks.

(see reverse side)
Is there a vaccine against meningococcal disease?
Yes, there are 2 different meningococcal vaccines. Quadrivalent meningococcal conjugate vaccine (Menactra and Menveo) protects against 4 serotypes (A, C, W and Y) of meningococcal disease. Meningococcal serogroup B vaccine (Bexsero and Trumenba) protects against serogroup B meningococcal disease. Meningococcal conjugate vaccine is routinely recommended at age 11-12 years with a booster at age 16. Students receiving their first dose on or after their 16th birthday do not need a booster. Individuals in certain high risk groups may need to receive 1 or more of these vaccines based on their doctor's recommendations. Adolescents and young adults (16-23 years of age) who are not in high risk groups may be vaccinated with meningococcal B vaccine, preferably at 16-18 years of age, to provide short-term protection for most strains of serogroup B meningococcal disease. Talk with your doctor about which vaccines you should receive.

Is the meningococcal vaccine safe?
Yes. Getting meningococcal vaccine is much safer than getting the disease. Some people who get meningococcal vaccine have mild side effects, such as redness or pain where the shot was given. These symptoms usually last for 1-2 days. A small percentage of people who receive the vaccine develop a fever. The vaccine can be given to pregnant women. A vaccine, like any medicine, is capable of causing serious problems such as severe allergic reactions, but these are rare.

Is meningococcal vaccine mandatory for entry into secondary schools that provide housing, and colleges?
Massachusetts law (MGL Ch. 76, s.15D) and regulations (105 CMR 220.000) requires both newly enrolled full-time students attending a secondary school (those schools with grades 9-12) who will be living in a dormitory or other congregate housing licensed or approved by the secondary school or institution and newly enrolled full-time students 21 years of age and younger attending a postsecondary institution (e.g., colleges) to receive a dose of quadrivalent meningococcal vaccine.

At affected secondary schools, the requirements apply to all new full-time residential students, regardless of grade (including grades pre-K through 8) and year of study. Secondary school students must provide documentation of having received a dose of quadrivalent meningococcal conjugate vaccine at any time in the past, unless they qualify for one of the exemptions allowed by the law. College students 21 years of age and younger must provide documentation of having received a dose of quadrivalent meningococcal conjugate vaccine on or after their 16th birthday, unless they qualify for one of the exemptions allowed by the law. Meningococcal B vaccines are not required and do not fulfill the requirement for receipt of meningococcal vaccine. Whenever possible, immunizations should be obtained prior to enrollment or registration. However, students may be enrolled or registered provided that the required immunizations are obtained within 30 days of registration.

Exemptions: Students may begin classes without a certificate of immunization against meningococcal disease if: 1) the student has a letter from a physician stating that there is a medical reason why he/she can’t receive the vaccine; 2) the student (or the student’s parent or legal guardian, if the student is a minor) presents a statement in writing that such vaccination is against his/her sincere religious belief; or 3) the student (or the student’s parent or legal guardian, if the student is a minor) signs the waiver below stating that the student has received information about the dangers of meningococcal disease, reviewed the information provided and elected to decline the vaccine.

Where can a student get vaccinated?
Students and their parents should contact their healthcare provider and make an appointment to discuss meningococcal disease, the benefits and risks of vaccination, and the availability of these vaccines. Schools and college health services are not required to provide you with this vaccine.

Where can I get more information?
- Your healthcare provider
- The Massachusetts Department of Public Health, Division of Epidemiology and Immunization at (617) 983-6800 or www.mass.gov/dph/imm and www.mass.gov/dph/epi
- Your local health department (listed in the phone book under government)

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Waiver for Meningococcal Vaccination Requirement
I have received and reviewed the information provided on the risks of meningococcal disease and the benefits of quadrivalent meningococcal vaccine. I understand that Massachusetts’ law requires newly enrolled full-time students at secondary schools who are living in a dormitory or congregate living arrangement licensed or approved by the secondary school, and newly enrolled full-time students at colleges and universities who are 21 years of age or younger to receive meningococcal vaccinations, unless the students provide a signed waiver of the vaccination or otherwise qualify for one of the exemptions specified in the law.

☐ After reviewing the materials above on the dangers of meningococcal disease, I choose to waive receipt of meningococcal vaccine.

Student Name: ____________________________ Date of Birth: ___________ Student ID: ___________

Signature: ____________________________ Date: ___________

(Student or parent/legal guardian, if student is under 18 years of age)

Provided by: Massachusetts Department of Public Health / Division of Epidemiology and Immunization / 617-983-6800

MDPH Meningococcal Information and Waiver Form
Updated January 2018