



Iowa Department of Public Health Certificate of Immunization

Name Last: _____ First: _____ Middle: _____ Date of Birth: _____
 Parent/Guardian: _____ Address: _____ Phone: (____) _____

I certify that the above named applicant has a record of age-appropriate immunizations that meet the requirement for licensed child care or school enrollment.
 Signature: _____ Date: _____

Physician, Physician Assistant, Nurse, or Certified Medical Assistant
 A representative of the local Board of Health or Iowa Department of Public Health may review this certificate for survey purposes.

Vaccine	Date Given	Doctor / Clinic / Source	Vaccine	Date Given	Doctor / Clinic / Source
Diphtheria, Tetanus, Pertussis DTaP/DTP/DT/ Td/Tdap			Varicella Chicken Pox If patient has a history of natural disease write "Immune to Varicella"		
Polio IPV/OPV			Pneumococcal PCV/ppv		
Measles, Mumps, Rubella MMR			Meningococcal MCV4/MPSV4		
Haemophilus influenzae type b Hib			Hepatitis A		
Hepatitis B			Rotavirus		
			Human Papilloma Virus HPV		
			Other		

Licensed Child Care Center

Age Group	Vaccine	Requirements
4 months through 5 months of age	Diphtheria/Tetanus/Pertussis	1 dose
	Polio	1 dose
	haemophilus influenzae type B	1 dose
	Pneumococcal	1 dose
6 months through 11 months of age	Diphtheria/Tetanus/Pertussis	2 doses
	Polio	2 doses
	haemophilus influenzae type B	2 doses
	Pneumococcal	2 doses
12 months through 18 months of age	Diphtheria/Tetanus/Pertussis	3 doses
	Polio	2 doses
	haemophilus influenzae type B	2 doses; or 1 dose received when the applicant is 15 months of age or older.
	Pneumococcal	3 doses if the applicant received 1 or 2 doses before 12 months of age; or 2 doses if the applicant has not received any previous doses or has received 1 dose on or after 12 months of age.
19 months through 23 months of age	Diphtheria/Tetanus/Pertussis	4 doses
	Polio	3 doses
	haemophilus influenzae type B	3 doses, with the final dose in the series received on or after 12 months of age, or 1 dose received when the applicant is 15 months of age or older.
	Pneumococcal	4 doses; or 3 doses if the applicant received 1 or 2 doses before 12 months of age; or 2 doses if the applicant has not received any previous doses or has received 1 dose on or after 12 months of age.
24 months and older	Measles/Rubella ¹	1 dose of measles/rubella-containing vaccine received on or after 12 months of age; or the applicant demonstrates a positive antibody test for measles and rubella from a U.S. laboratory.
	Varicella	1 dose received on or after 12 months of age if the applicant was born on or after September 15, 1997, unless the applicant has had a reliable history of natural disease.
	Pneumococcal	1 dose of pneumococcal vaccine is not indicated for persons 60 months of age or older.
	Measles/Rubella ¹	1 dose of measles/rubella-containing vaccine received on or after 12 months of age; or the applicant demonstrates a positive antibody test for measles and rubella from a U.S. laboratory.
4 years of age and older	Polio ⁶	3 doses, with at least 1 dose received on or after 4 years of age if the applicant was born on or before September 15, 2003; or 4 doses, with at least 1 dose received on or after 4 years of age if the applicant was born after September 15, 2003. ⁵
	Measles/Rubella ¹	2 doses of measles/rubella-containing vaccine; the first dose shall have been received on or after 12 months of age; the second dose shall have been received no less than 28 days after the first dose; or the applicant demonstrates a positive antibody test for measles and rubella from a U.S. laboratory.
	Hepatitis B	3 doses if the applicant was born on or after July 1, 1994.
	Varicella	1 dose received on or after 12 months of age if the applicant was born on or after September 15, 1997, but born before September 15, 2003, unless the applicant has had a reliable history of natural disease; or 2 doses received on or after 12 months of age if the applicant was born on or after September 15, 2003, unless the applicant has a reliable history of natural disease. ⁷

Elementary or Secondary School (K-12)