7TH GRADE ANNUAL REPORT

PART 1: NUMBER OF 7TH GRADE STUDENTS ENROLLED ON THE FIRST DAY OF SCHOOL

PART 2: EXEMPTIONS

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Medical</th>
<th>Religious</th>
<th>Personal</th>
<th>Total Exemptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Tdap</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>B. Polio</td>
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<tr>
<td>C. MMR</td>
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<tr>
<td>D. Hepatitis A</td>
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<tr>
<td>E. Hepatitis B</td>
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<tr>
<td>F. Varicella</td>
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<tr>
<td>G. Meningococcal</td>
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</tbody>
</table>

2H. TOTAL NUMBER OF STUDENTS WHO CLAIMED AN EXEMPTION
(This is the number of exemption forms you have)

PART 3: HOW MANY STUDENTS DID NOT PROVIDE THE SCHOOL WITH A COMPLETE IMMUNIZATION RECORD AT THE TIME OF ENROLLMENT (CONDITIONAL ENROLLMENT)

PART 4: HOW MANY STUDENTS WERE ON EXTENDED CONDITIONAL ENROLLMENT ON THE FIRST DAY OF SCHOOL BECAUSE:

a. More time was medically recommended to complete all required vaccine doses

b. School principal or administrator and a school nurse, a health official, or a health official designee agreed that an additional extension will likely lead to compliance with school immunization record requirements during the additional extension period

c. Total number of students who are on extended conditional enrollment (sum of 4a and 4b)

PART 5: HOW MANY STUDENTS ARE OUT OF COMPLIANCE?

PART 6: HOW MANY STUDENTS HAVE PROOF OF HISTORY OF DISEASE FOR ANY OF THE FOLLOWING VACCINES?

a. Tdap
b. Polio
c. MMR
d. Hep A
e. Hep B
f. Varicella (chicken pox)
g. Meningococcal
h. Total number of students with past history of disease

PART 7: HOW MANY STUDENTS HAVE RECEIVED ALL DOSES OF EACH REQUIRED VACCINE FOR SCHOOL ENTRY?

PART 8: TOTAL NUMBER OF STUDENTS ENROLLED
(Total of 2H, 3, 4C, 5, 6H, 7)

PART 9: BREAKDOWN OF CONDITIONAL AND/OR EXTENDED CONDITIONAL ENROLLMENT AND/OR NON-COMPLIANT STUDENTS

a. Students with less than the required number of Tdap vaccine
b. Students with less than the required number of polio vaccine
c. Students with less than the required number of MMR vaccine

Updated 10/7/2019
d. Students with less than the required number of **Hepatitis A** vaccine

e. Students with less than the required number of **Hepatitis B** vaccine

f. Students with less than the required number of **varicella** vaccine

g. Students with less than the required number of **meningococcal** vaccine

h. Students with **no immunization records**

i. Number of students who claimed they have an exemption, but did not turn in their exemption certificate/form

j. Number of students who claimed history of disease, but did not submit healthcare provider statement as proof of immunity