

**2<sup>ND</sup> DOSE MMR ANNUAL REPORT  
(ALL GRADES)**

School Year:  
Completed By:  
Title:  
Phone Number:  
School:

**PART 1: EXEMPTIONS**

Vaccine	Medical	Religious	Personal	Total Exemptions
MMR				

**PART 2: NUMBER OF CONDITIONAL STUDENTS**

(Students that have started the MMR series, but its not time yet for the next dose)

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**PART 3: NUMBER NON-COMPLIANT STUDENTS**

(Should have been excluded on the first day of school)

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**PART 4: TOTAL ADEQUATE FOR SCHOOL ENTRY**

(Number of students who have received all doses of MMR)

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**PART 5: TOTAL NUMBER OF STUDENTS ENROLLED**

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**PART 6: BREAKDOWN OF CONDITIONAL AND/OR NON-COMPLIANT STUDENTS**

- a. Students who are more than one month past their due date for their second MMR \_\_\_\_\_
- b. Students with **no immunization records** \_\_\_\_\_
- c. Students who had a second dose of MMR less than 28 days from their first dose \_\_\_\_\_
- d. Students who are on schedule for their second MMR dose (conditional students) \_\_\_\_\_
- e. Students who received their first MMR dose prior to their 1<sup>st</sup> birthday \_\_\_\_\_