

St. Maries Joint School District No 41 is required to provide educational services to all school-age children who reside within its boundaries. Attendance at school may be denied to any student who does not provide a statement to the school regarding the student's immunity to certain childhood diseases. Immunity requirements are met if the student has received or is in the process of receiving immunization as specified by the Board of Health and Welfare or has previously contracted the disease. The parent or legal guardian of the student must comply with the immunization requirements at the time of admission and before attendance is allowed for the student.

Summary of Immunization Requirements		
Immunization Requirement	Student born after September 1, 1999	Student born on or before September 1, 1999
Measles, Mumps and Rubella (MMR)	2 doses	1 dose
Diphtheria, Tetanus, Pertussis	5 doses	4 doses
Polio	3 doses	3 doses
Hepatitis B	3 doses	3 doses*

\*Hepatitis B – Three (3) doses unless the student was born on or before November 22, 1991.

Immunization Requirement	Student born after September 1, 1999 through September 1, 2005
MMR:	2 doses
Dtap:	5 doses
Polio	3 doses
Hepatitis B;	3 doses
Immunization Requirement	Student born after September 1, 2005
MMR:	2 doses
Dtap:	5 doses
Polio:	4 doses
Hepatitis B:	3 doses
Varicella (chickenpox):	2 doses
Hepatitis A:	2 doses
Immunization Requirement	Student admitted to 7 <sup>th</sup> grade during or after 2011-2012
Tdap (tetanus, diphtheria, pertussis):	1 dose
Meningococcal:	1 dose

\*Dtap: the 5<sup>th</sup> dose is not necessary if the 4<sup>th</sup> dose was administered at age four (4) years or older.

\*Polio: the 4<sup>th</sup> dose is not necessary if the 3<sup>rd</sup> dose was administered at age four (4) years or older and at least six (6) months after the previous dose.

\*Varicella: history of varicella (chickenpox) disease documented by a physician or licensed health care professional meets the requirement.

**IMMUNIZATION CERTIFICATION:**

The immunization certification statement must be signed by a physician or physician's representative stating the type, number, and dates of the immunizations received or the information can be obtained off the Idaho's Immunization Reminder Information System (IRIS) website.

**INTENDED IMMUNIZATION SCHEDULE:**

The schedule of intended immunizations statement must be provided by the parent or legal guardian of a student who is in the process of receiving or has been scheduled to receive the required immunizations. A child must have at least one dose of each required vaccine and be on schedule for subsequent dose to be conditionally admitted. A conditional attendance form is provided by the Idaho Department of Health and Welfare and contains the following information outlined below. This form must be completed documenting immunizations that have been given, and returned to the school within ten (10) business days from receipt of the form.

1. Name and age of student;
2. School and grade student is enrolling in and attending;
3. Type, number, and dates of immunizations to be administered;
4. Signature of the parent or legal guardian; and
5. Signature of a physician or physician's representative.

Students admitted to school and failing to continue the schedule of intended immunizations may be excluded from school until documentation of administration of the required immunizations is provided by the student's parent or legal guardian.

**EXEMPTIONS:**

1. Exemptions may be claimed for medical, religious or personal reasons. The exemption must be documented on a form provided by the Idaho Department of Health and Welfare.
2. Medical: requires a signed certificate from a physician stating the life of the child is endangered by administering immunizations.

3. Religious: requires a signed statement from a parent or guardian stating their objections to immunizations (simply stating religious does not qualify).
4. Personal: requires a signed statement from a parent or guardian stating their objections to immunizations (simply stating personal does not qualify)

**REPORTING:**

The School District shall submit a report of each school's immunization status to the State Department of Education on or before the first day of November of each year.

**Policy Cross Reference:**

**Legal Reference:**

Idaho Code 39-4801	Immunization Required
Idaho Code 39-4802	Exemptions
IDAPA 16.02.15	Immunization Requirements for Idaho School Children

**Policy History:**

Adopted:	03/13/2000
Reviewed:	11/10/2008
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Amended:	09/12/2011