

Exclusion Notice for Inadequate Immunizations

Date _____

Dear Parent/Guardian of _____

A recent review of immunization records shows that your child, _____, is currently not in compliance with Utah's School Immunization Law for Students (53G-9-302). Therefore, under Utah Statutory Code 53G-9-308, your child will be excluded from attending school/early childhood program on Date _____. We regret that we have taken this action, but state law requires that children must be appropriately immunized to attend a Utah school or early childhood program. Our facility supports this policy. Please obtain complete dates for the indicated immunizations and provide a record to us. If your child is not immunized due to medical, religious, or personal reasons, you are required to provide us the appropriate Utah exemption form. If your child has immunity against the disease for which the vaccination is required because your child previously contracted the disease, you need to provide us a document from a healthcare provider verifying that. Your child can not attend school until we have this information.

THE BOXES MARKED BELOW INDICATE DOSES NEEDED FOR YOUR CHILD'S RECORDS.

Vaccine	Dose in Question (circle dose number)	Reason (see codes to right)
DTaP/DT/Td*	1 2 3 4 5	
Tdap Booster*	1	
Polio	1 2 3 4	
MMR (Measles, Mumps, Rubella)	1 2	
Hepatitis B	1 2 3	
Haemophilus influenzae type b (Hib)	1 2 3 4	
Varicella (chickenpox)	1 2	
Hepatitis A	1 2	
Pneumococcal (PCV)	1 2 3 4 5	
Meningococcal	1	

- A.** Dates or doses are missing or incomplete.
- B.** Previous dose(s) was/were given too close together.
- C.** Previous dose(s) was/were given at too young an age.

*D = Diphtheria
 *T = Tetanus
 *P = Pertussis

If you have questions or need additional information, please call Phone # _____

Sincerely,

 School Official
 Title