Students registered for 6 or more credits are required by New York State Public Health Laws 2165 and 2167 to submit proof of immunization as requested below. Non-compliance results in registration cancellation. FORMS ARE DUE BEFORE CLASSES BEGIN.

*Please note, date format Month/Day/Year (MM/DD/YY).

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**IMMUNIZATION FORM FOR GRADUATE AND PART TIME STUDENTS**

Mail form to: STUDENT HEALTH CENTER 2001 Main Street, Buffalo, NY 14208  
P: 716.888.2610  
Fax form to: 716.888.3217  
canisius.edu/student_health

Upload this form to your new student portal at Student Health

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**PART 1 HEALTH CARE PROVIDER TO COMPLETE AND SIGN**

<table>
<thead>
<tr>
<th>MMR (Measles, Mumps, Rubella)</th>
<th>Dose #1</th>
<th>Dose #2</th>
</tr>
</thead>
<tbody>
<tr>
<td>If born after 1956, two doses of MMR vaccine required. Dose #1 administered on or after the 1st birthday. Dose #2 administered at least 28 days after the first dose.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MMR Serology/Titer</th>
<th>Measles Titer Date</th>
<th>Mumps Titer Date</th>
<th>Rubella Titer Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laboratory proof of immunity to measles, mumps and rubella (Laboratory report must be submitted with this form).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measles Titer Date</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mumps Titer Date</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rubella Titer Date</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**MENINGOCOCCAL REQUIREMENT**  
One dose of Meningococcal ACYW 135 in the past 5 years and/or completed series of Meningococcal B in the past 5 years.  
(Students may decline meningococcal vaccination by completing Part 2 of this form).

**MENINGOCOCCAL QUADRIVALENT**  
One dose ACYW within past 5 years

<table>
<thead>
<tr>
<th>Meningococcal B (MenB-4C (Bexsero) 2 Doses)</th>
<th>MenB-FHbp (Trumenba) 3 Doses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dose #1</td>
<td>Dose #2</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PART 2 STUDENT TO COMPLETE AND SIGN**

**MENINGITIS RESPONSE: STUDENT MUST COMPLETE IF DECLINING MENINGOCOCCAL VACCINATION**

☐ I have read or have had explained to me, the information regarding meningococcal meningitis. I understand the risks of not receiving the vaccine. I have decided that I (my child) will **not** obtain immunization against meningococcal disease.

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**SIGNATURE OF STUDENT OR PARENT/GUARDIAN OF MINOR STUDENT**  
**DATE (MM/DD/YY)**
WHAT IS MENINGOCOCCAL DISEASE?
Meningococcal disease is caused by bacteria called Neisseria meningitidis. It can lead to serious blood infections. When the linings of the brain and spinal cord become inflamed, it is called meningitis. The disease strikes quickly and can have serious complications, including death.

WHO GETS MENINGOCOCCAL DISEASE?
Anyone can get meningococcal disease. Some people are at higher risk. This disease occurs more often in people who are:
• Teenagers or young adults
• Infants younger than one year of age
• Living in crowded settings like college dormitories or military barracks
• Traveling to areas outside of the United States, such as the “meningitis belt” in Africa
• Living with a damaged spleen or no spleen
• Being treated with Soliris or, who have complement component deficiency (an inherited immune disorder)
• Exposed during an outbreak
• Working with meningococcal bacteria in a laboratory

WHAT ARE THE SYMPTOMS?
Symptoms appear suddenly-usually 3 to 4 days after a person is infected. It can take up to 10 days to develop symptoms. Symptoms may include:
• A sudden high fever
• Headache
• Stiff neck (meningitis)
• Nausea and vomiting
• Red-purple skin rash
• Weakness and feeling very ill
• Eyes sensitive to light

HOW DOES MENINGOCOCCAL DISEASE SPREAD?
It spreads from person-to-person by coughing or coming into close or lengthy contact with someone who is sick or who carries the bacteria. Contact includes kissing, sharing drinks, or living together. Up to one in 10 people carry meningococcal bacteria in their nose or throat without getting sick.

WHAT ARE THE COMPLICATIONS?
Ten to 15 percent of those who get meningococcal disease die. Among survivors, as many as one in five will have permanent disabilities. Complications include:
• Hearing loss
• Brain damage
• Kidney damage
• Limb amputations

WHAT IS THE TREATMENT FOR MENINGOCOCCAL DISEASE?
Early diagnosis of meningococcal disease is very important. If it is caught early, meningococcal disease can be treated with antibiotics. But, sometimes the infection has caused too much damage for antibiotics to prevent death or serious long-term problems. Most people need to be cared for in a hospital due to serious, life-threatening infections.

WHAT SHOULD I DO IF I OR SOMEONE I LOVE IS EXPOSED?
If you are in close contact with a person with meningococcal disease, talk with your health care provider about the risk to you and your family. They can prescribe an antibiotic to prevent the disease.

WHAT IS THE BEST WAY TO PREVENT MENINGOCOCCAL DISEASE?
The single best way to prevent this disease is to be vaccinated. Vaccines are available for people 6 weeks of age and older. Various vaccines offer protection against the five major strains of bacteria that cause meningococcal disease:
• All teenagers should receive two doses of vaccine against strains A, C, W and Y. The first dose is at 11 to 12 years of age, and the second dose (booster) at age 16.
  • It is very important that students receive the booster dose at age 16 in order to protect them through the years when they are at greatest risk of meningococcal disease.
  • Talk to your health care provider if you have not received two doses of vaccine against meningococcal strains A, C, W and Y.
• College students can also be vaccinated against the “B” strain. Talk to your health care provider about whether they recommend the vaccine against the “B” strain.

Others who should receive the vaccine include:
• Infants, children and adults with certain medical conditions
• First-year college students through 21 years of age living in residential housing
• People exposed during an outbreak
• Travelers to the “meningitis belt” of Sub-Saharan Africa
• Military recruits

IS THERE AN INCREASED RISK FOR MENINGOCOCCAL DISEASE IF I TRAVEL?
Meningococcal disease and outbreaks occur in the United States and around the world. The disease is more common in the “meningitis belt” of sub-Saharan Africa. The risk is highest in people who visit these countries and who have prolonged contact with local populations during an epidemic. To reduce your risk of illness, wash your hands often, maintain healthy habits, such as, getting plenty of rest and try not to come into contact with people who are sick.

HOW DO I GET MORE INFORMATION ABOUT MENINGOCOCCAL DISEASE AND VACCINATION?
Learn more about meningococcal disease at www.cdc.gov/meningococcal/ or www.health.ny.gov/.