

# Student Health Requirements

Immunization to measles, mumps, and rubella (MMR) is a requirement for all UNI students. This documentation is **mandatory** for all new students and must be on file and in compliance by the tenth day of the first term enrolled at UNI. If students are not in compliance, a **\$30 late fee** will be assessed and a hold will be placed on the students' account preventing them from registering for the following semester.

**The Student Health Clinic accesses IRIS, the Iowa Immunization Registry Information System for gathering MMR/Meningitis information students who are Iowa residents. If a student is not from the state of Iowa we are not able to access their immunization record.**

**Students will need to provide a copy of their immunization records documenting proof of TWO MMR vaccinations, including month, day and year.** You can obtain your immunization records from:

- Your family doctor's office.
- High school or other colleges you may have attended.
- Public health records or military records. If you have served in the military, a photocopy of your military ID or your DD214 is all that is needed.

**A photocopy of your documentation is required and can be submitted one of the following ways:**

- Fax: 319-273-7030
- Email: [immunizations@uni.edu](mailto:immunizations@uni.edu)

## **Meningococcal (Meningitis) Information:**

The University of Northern Iowa supports the Center for Disease Control and Prevention (CDC) and the American College Health Association (ACHA) recommendation that all college students be up-to-date with their meningococcal vaccination(s).

Meningitis is an infection of the fluid surrounding the brain and spinal cord that is caused by a virus or bacteria. Bacterial meningitis can be severe and cause organ damage and death. There are vaccines available that can prevent 4 types of bacterial meningitis, including 2 of the 3 most common in the U.S. The meningitis vaccine is recommended for all college students. Iowa Law requires us to collect and report meningitis immunization data for our campus.

Please include the date/dates of your meningitis vaccine. **If you received the meningitis vaccine before age 16 the CDC recommends a booster dose.**

**Vaccine date #1** \_\_\_\_\_ **Vaccine date #2** \_\_\_\_\_

If you choose **NOT** to be vaccinated for meningitis, please sign below and return to the UNI Student Health Clinic:

Student Name \_\_\_\_\_ UNI ID# \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Your signature verifies that you understand the risk of not receiving the vaccination.