

IRVINE UNIFIED SCHOOL DISTRICT

California Immunization Requirements for Transitional Kindergarten, Kindergarten and Grades 7 – 12

VACCINE	4-6 YEARS OLD	7-17 YEARS OLD	7th GRADE *
	Elementary School at Transitional Kindergarten/ Kindergarten and Above	Elementary or Secondary School	<i>*Students entering 7th grade must also meet the requirements for ages 7-17</i>
Polio (OPV or IPV)	4 doses (3 doses OK if one was given on or after 4 th birthday.)	4 doses (3 doses OK if one was given on or after 2 nd birthday.)	
Diphtheria, Tetanus, and Pertussis (DTaP, DTP, DT, or Tdap)	5 doses of DTaP, DTP, or DT (4 doses OK if one was given on or after 4 th birthday.)	4 doses of DTaP, DTP, DT, Tdap, or Td (3 doses OK if last dose was given on or after 2 nd birthday. At least one dose must be Tdap or DTaP/DTP given on or after 7 th birthday for all 7 th -12 th graders.)	1 dose of Tdap Booster (Or DTP/DTaP given on or after 7 th birthday.)
Measles, Mumps, and Rubella (MMR or MMR-V)	2 doses (Both doses given on or after 1 st birthday. Two doses of measles containing vaccine is required. Only one dose of mumps and rubella vaccines are required if given separately.)	1 dose (Dose given on or after 1 st birthday. Mumps vaccine is not required if given separately.)	2 doses of MMR or any measles-containing vaccine (Both doses given on or after 1 st birthday.)
Hepatitis B (Hep B or HBV)	3 doses		
Varicella (Chickenpox, VAR, MMR-V or VZV)	1 dose	1 dose for ages 7-12 years 2 doses for ages 13-17 years	

DOCUMENTATION

California immunization laws and Irvine Unified School District Policy 5141.31 require that upon school entry, **all pupils must show written proof of immunizations**. A personal immunization record completed by a physician or clinic **or** the blue California School Immunization Record from a former school **or** another state's school record serves as documented proof. **Documents must be in English. If translation is needed it is the parents responsibility to have this completed prior to registration.**

Documents must include:

- Child's first and last name
- Child's date of birth
- Type and date of each dose of vaccine, including month and year as a minimum. (For measles, rubella and/or mumps vaccine given in the month of the first birthday, month, day and year are required.)
- Name of physician or clinic who administered the vaccine
- If immunizations are transcribed from previous records by the attending physician/clinic "TRANSCRIBED" must be written next to each immunization or diagonally across all lines for a vaccine series. The attending physician/clinic stamp must be stamped on the front of the immunization record to confirm who verified the immunizations.

Immunization records are reviewed by school staff to verify compliance. Resources are provided to assist families in obtaining needed immunizations.