HASTINGS PRINCE EDWARD Public Health

School Immunization History

TO BE COMPLETED AT TIME OF REGISTRATION

Hastings Prince Edward Public Health (HPEPH) is required under the *Immunization of School Pupils Act* (ISPA) to collect and maintain up-to-date records of immunization for every child registered in school in Hastings and Prince Edward Counties. **The ISPA states that parents are required to provide Public Health with proof of completed immunization for diphtheria, tetanus, polio, pertussis, measles, mumps, rubella, meningococcal and varicella (chicken pox)*, or with the appropriate documentation if they choose not to have their child immunized** (*Statement of Medical Exemption* or *Statement of Conscience or Religious Belief Affidavit*). Please contact HPEPH for more information at 613-966-5500 x221.

Please complete the following section at the time of school registration and attach a photocopy of your child's immunization record (ensure child's name and date of birth are recorded on the photocopy). The school will forward the completed form to HPEPH, who will review the immunization information and maintain a record for each student. If your child's immunization is not complete, you will be notified by HPEPH. To avoid potential suspension, please ensure we have a complete, up-to-date immunization record for your child.

Immunization records and updates are *NOT* automatically provided to Public Health by your health care provider. Options available to update HPEPH with your child's immunization records:

- Phone: 613-966-5500 x221
- Fax: 613-966-8145
- Email: CDCIMM@hpeph.ca
- Our Website by using ICON (hpePublicHealth.ca)

***Chickenpox vaccine is required for school attendance only if born in 2010 or later. It is recommended that all children born on or after Jan 1, 2000 receive 2 doses of the vaccine, if they have not had the disease.**

STUDENT INFORMATION **(Please Print. Ensure ALL information is completed.)**	Date: _____ year / month / day
Last Name:	
First Name:	
Date of Birth: year / month / day	☐ M ☐ F ☐ Other
Ontario Health Card Number:	
Parent / Guardian:	
Postal Mail Address:	
City:	Postal Code:
Phone (Cell):	(Home): (Other):
School that child is or will be attending:	
Previous School: name of school	city/town / province

We are committed to providing accessible publications, programs and services to all.
For assistance please call 613-966-5500; TTY 711, or email accessibility@hpeph.ca.
For more information, visit hpePublicHealth.ca.

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This information is collected under the authority of the *Health Protection and Promotion Act R.S.O 1990 c.H.7., s.4* and the *Immunization of School Pupil's Act 1990*. The personal health information collected on this form will be used to maintain immunization records and to monitor the use of vaccines for public health purposes. Questions regarding the collection and use of personal health information should be directed to the Privacy Officer, Hastings Prince Edward Public Health, 179 North Park St., Belleville, ON K8P 4P1, 613-966-5500 or 1-800-267-2803.