

## **Alabama Department of Public Health**

**CERTIFICATE OF IMMUNIZATION** 

05/31/2020

Date of Expiration

(Next Required Immunization)

TEST TEST	05/31/2009
Child's Name (first, middle, last)	Birthdate

Parent/Guardian Name (first, middle, last)

Unless Specifically exempted by law, Alabama law(code of Alabama 1975, Section 16-30-4) requires a certificate on file for each child in attendance in all schools and licensed child care facilities in Alabama. Instructions for this form and immunization requirements by age are detailed via the ADPH web site at www.adph.org/immunization

Vaccine	DOSE1 DATE	DOSE2 DATE	DOSE3 DATE	DOSE4 DATE	DOSE5 DATE	DOSE6 DATE	Total Doses	Confirmed Lab	History
	MM   DD   YY	MM   DD   YY	MM   DD   YY	MM   DD   YY	MM   DD   YY	MM   DD   YY	Doses	MM   YY	MM   YY
		Requ	ired Vaccines	for School or	Child Care Att	endance			
DTP,DTaP,DT	DTAP 12/29/09	DTAP 01/10/14	DTAP 01/01/15	DTAP 05/05/15	DTAP 05/25/16				
TD		10	717			0			
Tdap	-						1		
IPV,OPV	IPV 01/02/16	IPV 07/05/16	IPV 01/02/17	E.			10		
Hib (Under Age 5)									
Measles	MMR 05/31/10	MMR 07/05/16	0				A		
Mumps	MMR 05/31/10	MMR 07/05/16	M. Shirt	1 4 4	W Mentel			1	
Rubella	MMR 05/31/10	MMR 07/05/16	<b>用的基金</b>	+ W	R	W.	Ì	1	
PCV	PCV13 10/29/15	PCV13 08/12/16		<u>ر سا</u> د				0	
Varicella	VARICELLA 07/05/16		7000		X ( )	* 4		11/16	05/16
	13		Reco	mmended Vac	cines			4/	

Recommended Vaccines									
НерА	HEP A 04/25/16						A	/	
НерВ	HEP B 04/27/16	HEP B 08/01/16	4			A	11		
HPV						1	A STATE OF THE PARTY OF THE PAR		
MCV, MPSV,MENB		N.C.	7		- 4	1			
Rotavirus			A	187	5				

## **NOTES**

A licensed physician or qualified employee of the Alabama Dept of Public Health is responsible for the content of this certificate. All dates must include the month, day, and year. In cases of history of disease or laboratory confirmation, the month and year of infection or test must be filled in the appropriate box(es).

The certificate is NOT valid without the name and birth date of the child, date of expiration, name and address of the physician or health department, and date of issue. A school or facility offical is responsible for keeping a current valid Certificate on file for each child in attendance. When a child leaves or transfers to another facility, the Certificate of Immunization should be given to a parent/guardian.

Site Name : ADPH INTERNAL SITE

Address: 201 MONROE ST MONTGOMERY

Telephone #: (800) 4694599

Date of Issue: 2/15/2017