

STATE OF ALABAMA CERTIFICATE OF IMMUNIZATION

EXPIRATION DATE REQUIRED

(Date next vaccine is due)

7/30/2025
Mo/Day/Year

WRIGHT, BROOKLYN

10/22/2003

WRIGHT, BRANDY & JUSTIN

Name of Child

Date of Birth

Parent or Guardian

Diphtheria, Tetanus and Pertussis Vaccine A medical exemption (see reverse side) is required for children less than 7 years of age who are not given pertussis vaccine

DTaP

DTaP

DTaP

DTaP

TDAP

12/23/2003

3/2/2004

4/22/2004

2/1/2005

6/25/2015

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Polio Vaccine

IPV

IPV

IPV

IPV

12/23/2003

3/2/2004

4/22/2004

4/29/2008

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Measles, Mumps, and Rubella Vaccine

MMR

MMR

10/28/2004

4/29/2008

Mo/Day/Year

Mo/Day/Year

Haemophilus Influenzae Type b (Required for Day Care and Head Start only. Please record for historical information.)

HIB

HIB

HIB

HIB

12/23/2003

3/2/2004

4/22/2004

2/1/2005

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Varicella Vaccine (Required for Day Care and Head Start September 2000. Required for Kindergarten entry Fall of 2001 and for grade higher each successive year.)

In lieu of Varicella Vaccine

History of Chickenpox

Positive Varicella

10/28/2004

4/29/2008

Varivax

Varivax

Pneumococcal Conjugate Vaccine

Prevnar

Prevnar

Prevnar

Prevnar

12/23/2003

3/2/2004

4/22/2004

2/1/2005

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Not required for school attendance Please record for historical information Do not expire this certificate for these vaccines

Hepatitis B Vaccine

Hep B

Hep B

Hep B

12/23/2003

3/2/2004

4/22/2004

Mo/Day/Year

Mo/Day/Year

Mo/Day/Year

Other: Specify Vaccine (not to include TB skin test)

Hep A 10/24/2006

Hep A 2/17/2009

Flu Mist 9/7/2012

GARDASIL 9 6/25/2015

A. Woodard, R
Authorized Medical Signature

6/25/2015

Date

Tuscaloosa Pediatrics

Name of Clinic