School Immunization Survey Vaccine Specific Exemptions Worksheet for Kindergarten through Grade 5

- Use this worksheet to help you fill out the survey form. **DO NOT RETURN TO US. Keep for your records.**
- Make photocopies of this worksheet before filling it out if you know you will need more.
- Only transfer “Summary Totals” from the front of the last worksheet to the survey form.

School Name_____________________________________________________
Grade______
Page ____ of ____

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Medical Exemptions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>DTaP Vaccine</td>
</tr>
</tbody>
</table>

Example: Joe I. Smith

Subtotals for page
Summary Totals

**Instructions:**

**Student Name:** Per line enter the name for each student who has a medical exemption to immunization.

**Exemption Vaccine Fields 1 through 5:** Enter an “X” in the boxes under the appropriate vaccine fields for which each student that has a valid medical exemption.

**Tabulating the Data:**

Add the number of “X’s” in each column and enter the sub-totals on each page.
Add the sub-totals for each page and enter the summary totals on the last page.
Transfer all totals by grade onto the survey summary form.

12/20