

Immunization Data Entry Worksheet

School Year: _____

Counts by Grade	Protected and in Compliance	Religious Objection	Medical Reason or Objection	Approved Schedule	Unprotected and in Noncompliance (include transfer students without records)
Prekindergarten					
Polio					
DTP/DTaP/Td					
Measles					
Rubella					
Mumps					
Hepatitis B					
Hib					
Varicella/Chickenpox					
Kindergarten					
Polio					
DTP/DTaP/Td					
Measles					
Rubella					
Mumps					
Varicella/Chickenpox					
Grade 1					
Polio					
DTP/DTaP/Td					
Measles					
Rubella					
Mumps					
Varicella/Chickenpox					
Grade 2					
Polio					
DTP/DTaP/Td					
Measles					
Rubella					
Mumps					
Varicella/Chickenpox					
Grade 3					
Polio					
DTP/DTaP/Td					
Measles					
Rubella					
Mumps					
Varicella/Chickenpox					
Grade 4					
Polio					
DTP/DTaP/Td					
Measles					
Rubella					
Mumps					
Varicella/Chickenpox					