

# Notice of Missing Immunizations For Child Care



Child's Name: \_\_\_\_\_

Immunization records show that your child may not be adequately immunized as required by the Immunization Regulations (18 V.S.A. § 1123).

Circle the vaccine and number of doses the child needs to receive to meet state immunization requirements. Please ensure your child has received required vaccines as soon as possible. If your child has received the circled dose/doses, please present an immunization record to the child care provider.

Circle the vaccine and number of doses the child needs to receive to meet state immunization requirements.

Vaccine Type	Dose/Doses Needed			
<b>Hepatitis B</b> (HBV or Hep B )	1	2	3	
<b>DTaP</b> (Diphtheria, Tetanus, and Pertussis)	1	2	3	4
<b>HIB</b> (Haemophilus Influenzae Type B)	1	2	3	4
<b>PCV</b> (Pneumococcal)	1	2	3	4
<b>Polio</b> (OPV or IPV)	1	2	3	
<b>MMR</b> (Measles, Mumps, and Rubella)	1			
<b>Varicella</b> (Chicken Pox)	1 or History of Disease			

There is no record of any immunizations on file for the child named above. Please submit a complete immunization record or exemption form to the child care provider immediately.

\_\_\_\_\_  
Print Name of Child Care Provider: \_\_\_\_\_

Signature of Child Care Provider: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_