

SCHOOL REPORT TO LOCAL HEALTH DEPARTMENT

Wisconsin State Statute 252.04 requires that all students through grade 12 who do not submit waivers must present evidence of having received at least the first dose of each vaccine required for their grade within 30 school days of admission and the second dose of DTP/DTaP/DT/Td, Polio, MMR, Hepatitis B and varicella vaccines within 90 school days of admission. Evidence of the third and fourth doses (if required for their grade) of DTP/DTaP/DT/Td, Polio and the third dose of Hepatitis B vaccines must be submitted within 30 school days of the beginning of the next school year. Schools must report to the local health department the compliance by students each year by the 40th school day.

Telephone	I.D. Number for Address Label	School District
Principal	Person Completing Form	

Name of School (as listed on label)		
Address		
City/Town	Zip	County

COMPLETE BOTH PARTS A AND PART B (Part B is on reverse)

PART A

INSTRUCTIONS: Indicate how many students fall into each category (A through G) in the grade groupings below. The sum of these categories (row H) must equal the enrollment for the grade(s) in that column. List students in rows B through G in Part B. Mail to your local city or county health department, not the Wisconsin Department of Health Services. **On the fillable form, use the tab key to move from cell to cell. Cells can not be left blank (insert 0 where needed). The TOTAL row and column will fill automatically.**

	List Number of Students	Pre-Kindergarten	Kindergarten	Grades One thru Twelve	TOTAL
A	Who meet all minimum requirements				0
B	<i>In Process</i> (first dose within thirty school days and second dose within ninety school days)				0
C*	<i>Behind Schedule</i> (missed deadline for first, second, or final doses of vaccine)				0
D*	With <i>no record</i> on file				0
E	With health <i>waiver</i>				0
F	With religious <i>waiver</i>				0
G	With personal conviction <i>waiver</i>				0
H**	TOTAL (must = enrollment for grades included in the column)	0	0	0	0

*Names of these students are to be reported to the district attorney and/or may be excluded.

**Total Row H = Total of Last Column = Enrollment of School

Instructions: List all students from Part A, rows 2 through 7 in ascending grade order, include date of birth, grade level, and vaccine(s) received to date. Enter "0" if no vaccine was received. Use extra sheets if necessary. **Dropdowns are provided for Grade and Vaccine Dose.**

- For student(s) **BEHIND SCHEDULE** or **NO RECORD** (Part A, rows 3 & 4) enter date student(s) will be reported to the District Attorney.
- For student(s) **IN PROCESS** or **WAIVERS** (Part A, rows 2,5,6 & 7) check appropriate box, 'In Process', H=Health Reasons, R=Religious Reasons, and PC=Personal Conviction. Under Varicella indicate total doses received or "D" for disease. Note: If a separate list is maintained of students who are **IN PROCESS** of receiving only Varicella vaccine and/or **BEHIND SCHEDULE** in receiving only Tdap vaccine, it is not necessary to list these students on Part B.
- For MMR, if first dose was received before the student's first birthday, do not count the dose. Do not include a history of disease, only the vaccine.

Name	Date of Birth (mm/dd/yyyy)	Date of Admission To WI School	Grade	Non-Compliant / Report to District Attorney (x)		Mark (x)				DTP / DTaP / DT / Td		Polio		Hep B	MMR	Varicella	Tdap
				Behind Schedule	No Record	In Process	H	R	PC	Total Doses	Last Dose Date	Total Doses	Last Dose Date	Total Doses	Total Doses	Total Doses or D= Disease	Dose Date
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
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			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	
			-	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0		0		0	0	0	