



**CUPERTINO UNION SCHOOL DISTRICT**  
**Immunization Requirements**  
**TK/Kindergarten – 8<sup>th</sup> Grade**

<b>IMMUNIZATIONS (SHOTS) REQUIREMENTS: All records must be signed or stamped by a licensed health care provider or clinic.</b>		
<b>VACCINE</b>		<b>REQUIRED DOSES K-8</b>
Polio	4 Doses	<i>Ages 4-6:</i> 3 doses OK if 1 dose was given on or after the 4 <sup>th</sup> birthday.
		<i>Ages 7-17:</i> 3 doses OK if 1 dose was given on or after the 2 <sup>nd</sup> birthday.
Diphtheria, Tetanus, Pertussis	5 Doses	<i>Ages 4-6:</i> (DTaP, DTP, or DT) 4 doses OK if 1 dose was given on or after the 4 <sup>th</sup> birthday
	4 Doses	<i>Ages 7-17:</i> (DTap, DTP, DT, Tdap, or Td) 3 doses OK if last dose was given on or after the 2 <sup>nd</sup> birthday. At least 1 dose must be Tdap or DTaP/DTP given on or after 7 <sup>th</sup> birthday for all 7 <sup>th</sup> -12 <sup>th</sup> graders.
		<b>7<sup>th</sup> Grade:</b> 1 dose of Tdap (or DTP/DTaP) on or after the 7 <sup>th</sup> birthday
Measles, Mumps, Rubella (MMR)*	2 Doses	<b><i>Ages 4- 6:</i></b> 2 doses both given on or after 1 <sup>st</sup> birthday <b><i>7<sup>th</sup> grade:</i></b> 2 doses both given on or after 1 <sup>st</sup> birthday
	1 Doses	<i>Ages 7-17, except 7<sup>th</sup> grade (see above):</i> 1 dose given on or after 1 <sup>st</sup> birthday and a second dose is recommended
Hepatitis B (HBV)	3 Doses	<i>Ages 4-6:</i> 3 doses
Varicella (Chicken-pox)	1 Dose	<i>Admission at Ages 4-12:</i> 1 dose for children under 13 – or proof of the disease by doctor
	2 Dose	<i>Admission at Ages 13-17:</i> 2 doses - or proof of the disease by doctor

<b>TB RISK ASSESSMENT &amp; TUBERCULOSIS: Test/x-ray must be done in the USA. Tine Test not acceptable.</b>	
Risk Assessment/TB Test	TK/K-8: <b>Up to 12 months prior to school registration</b>
Risk Assessment evaluated has risk factor	TB SKIN TEST OR IGRA IS REQUIRED
Tuberculosis Skin Test (TST)	The TST must be read within 48-72 hours of the date given to be valid.
	<b>Written proof</b> of date given, date read, and reading of induration in millimeters and signature of the doctor is required.
	If Positive, then chest x-ray required
<b>OR</b>	
Interferon Gamma Release Assays (IGRA) blood test	<i>TK/Kindergarten – Grade 8:</i> must be age 4 <i>Results:</i> If Positive or Indeterminate then chest x-ray is required
<b>If treated with medication: documentation of date started, date therapy completed, medication and dosage must be included.</b>	

\*Two doses of measles-containing vaccine required. One dose of Mumps and Rubella

**HEALTH EXAMINATION FOR SCHOOL ENTRY** form (PM171A) is required upon enrollment in first grade. The form must be completed by your doctor. **Children may have the health exam as early as six months before starting kindergarten (i.e., February 1)**