

Meningitis Information Response Form

Oklahoma Statutes, Title 70 §3243, requires all students who are **first-time enrollees residing on campus be vaccinated against meningococcal disease**. The statute requires that institutions notify students of the vaccination requirements and provide students with educational information concerning meningococcal disease including the risks and benefit of vaccination. The statute permits the student or, if the student is a minor, the student's parent or other legal representative, to sign a written waiver stating that the student has received and reviewed the information provided on the risks associated with meningococcal disease and on the availability and effectiveness of any vaccine, and has chosen not to be or not to have the student vaccinated.

These requirements do not apply to students enrolled in courses delivered via the Internet or distance learning.

Student's	s Name:	
Age:	Date of Birth:	Social Security#:
Term/Ye	ear of enrollment:	
meningo		wiewed the information provided to me by Northeastern State University on ion thereof; the benefits, risks, and effectiveness of immunization; and the availability and
I, the stu	dent, parent or guardian unders	tand the risks of meningococcal meningitis and the benefits of immunization.
I, the stu	dent, parent or guardian have el	ected the following option:
	Have been immunize compliance.	ed and have proof of immunization. Please send a copy of immunization to be reviewed for
	Date of Immu	nization:///
	Choose not to obtain	immunization against meningococcal meningitis.
Signature	e of Student:	Date:
If the stu	ident is a minor under the age of	eighteen, the signature of the parent of guardian is required.
Signatur	e of parent or guardian:	Date:
Please s	end completed form to Studen	t Health Services 720 N Lewis Ave Tahlequah OK 74464 or fax to 918-458-2300