

Name \_\_\_\_\_

**Immunization & PPD Requirements**

Please use this form to guide you in obtaining the required health records for the class.  
We must have official, printed documentation from Health Department, OR  
your physician in order for immunization proof to be valid.

- Measles, Mumps, and Rubella (MMR)  
Immunizations (2 Steps) or titer

Date #1 \_\_\_\_\_

Date #2 \_\_\_\_\_

- Chickenpox (Varicella)  
Immunization or titer

Date \_\_\_\_\_

- Tetanus toxoid booster (DTaP; Td)  
(within the last 10 years)

Date \_\_\_\_\_

- Hepatitis B vaccine (Hep B)

Date #1 \_\_\_\_\_

Date #2 \_\_\_\_\_

Date #3 \_\_\_\_\_

- Tuberculosis skin test (PPD)  
(within the past 12 months)

Date \_\_\_\_\_ Results \_\_\_\_\_

Your family physician or the Kershaw County Health Department at 1116 Church Street  
in Camden can provide you with these immunizations/titers or the PPD test if you do not  
have the medical paperwork.