

INSTRUCTIONS

Students must complete Section A AND **either** Section B, C, or D. Completed forms must be returned to **Housing and Food Services** prior to students checking in to housing.

***** Students that do not have a form on file will NOT be permitted to live in University housing. *****

Section A: STUDENT INFORMATION

Student Name _____

PSU ID number _____

Home Address _____

City _____ State _____ Zip _____

Home Phone Number _____ Campus Address _____
(if known)

Home Email Address _____ Penn State E-mail _____
 Account AccessID _____

Section B: HEALTH CARE PROVIDER CERTIFICATION

I am verifying that the above-named individual received the meningococcal vaccination on this date: _____

Name (print) _____ MD/DO/NP/PA/RN Date _____

Signature _____ License Number _____

Section C: STUDENT CERTIFICATION

I have received the meningococcal vaccination and have **attached** a copy of my immunization record for verification.

Signature _____ Date _____

Section D: EXEMPTION WAIVER

I have received and reviewed the information sent to me by Penn State regarding the risks associated with meningococcal disease, and the availability and effectiveness of the vaccine against this disease. I am requesting a waiver to the requirement for on-campus housing students to have a one-time meningococcal vaccination on the basis that I have chosen not to be vaccinated due to religious or personal reasons.

Signature _____ Date _____
 Signature of student age 18 or older

Signature _____ Date _____
 Parent signature for student under age 18

COMPLETED FORMS

Completed forms must be returned to **Housing and Food Services** prior to arrival; **failure to submit a completed form will result in the student not being able to move into University housing.** Completed forms should be sent to Penn State Berks, Housing and Food Services, Tulpehocken Road, PO Box 7009, Reading PA 19610. For questions, please call 610-396-6353, E-mail housingBK@psu.edu, or visit the website www.hfs.psu.edu/vaccine.