



ARCHBISHOP ALTER HIGH SCHOOL

Meningococcal Vaccine

The Ohio Department of Health requires all incoming senior students receive and provide documentation for two meningococcal vaccines a minimum of eight week apart, prior to entry of their senior year to avoid being excluded from school on the first day of school. If you do not want your student to have this vaccine as a Parent, you have the option of signing a waiver exempting your student from this vaccination due to religious, personal or medical reasons.

If your student has already received the two meningococcal vaccines, please have your physician complete and sign the form below and send it to the clinic. If your student has not received the vaccines, please contact your health care provider so that you may make an appointment to have them immunized or choose one of the exemptions below. Public Health-Dayton Montgomery County also offers immunizations at a reduced cost. For more information call 937-225-4550. If you have questions regarding this requirement, please contact your PCP or the school nurse. The Ohio Department of Health immunization requirements are on the web site updated yearly www.alterhs.org, select Parents at the top scroll down to clinic and you will see the form from the State of Ohio.

Sincerely,

Sherry Kahn MS, RN, APRN, CNP-P School Nurse, Office: 937.428.5321
sherry.kahn@alterhs.org www.AlterHS.org

Please return to Archbishop Alter High School Clinic

Name of Student _____ Dates of
Meningococcal: #1 dose _____ #2 dose _____ Signature of
Physician _____

I wish to exempt my child from the meningococcal vaccine. I understand by exempting my child from required vaccines that my child could be exempted from school should an outbreak of a communicable disease occur. Please indicate your reason for exemption.

Reason for Exemption: Religious/Philosophical _____ Medical Objection _____

Parent Signature: _____

Date _____

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