

After School Kindness, Inc. Immunization Forms Instructions

Thank you for enrolling your child in the After School Kindness, Inc. program! View the information below and <u>follow the easy steps to complete</u> <u>your child's immunizations</u>. Print this immunization form at the bottom of the page (or complete it online if possible), transcribe your child's immunizations on our state-regulated immunization form, and attached your child's original immunization form signed by the doctor. Upload all immunization documents, and have them prepared when you enroll on the parent portal. Once submitted, it will go through the reviewal process. Once approved, you will be sent an email with a confirmation.

Immunization Form Steps:

- 1) Fully transcribe your child's immunizations <u>onto our After School</u> <u>Kindness, Inc.'s state-regulated immunization form</u> below. This step is mandatory for our licensing and state inspectors to be able to approve your child into the program.
- Upload your child's original immunization form WITH the Doctors signature. We MUST have a Doctors signature provided, or we will not be able to accept the form.
- 3) Once you have completed these steps, upload both documents in **ONE** attachment (transcribed immunizations + signed immunization from the doctor). You will submit this when you enroll on the parent portal.

NOTE: You will <u>not</u> be able to enroll on the parent portal without the proper immunizations being uploaded and submitted at the time of enrollment.

Is your child <u>exempt from immunizations</u>? You can fill out the Medical or Non-Medical Immunization Exemption Forms online and submit them on the parent portal under "immunizations" when you enroll. State regulations have a mandatory training course called (*Online Immunization Education Module*) at the bottom of their website that will give you a Downloadable Certificate of Nonmedical Exemption for your child. No signed Doctor's note will need to be provided.

• Exempt Immunizations Click this link: https://cdphe.colorado.gov/vaccine-exemptions

After School Kindness, Inc. State Required Childcare Immunization Form

www.afterschoolkindness.com / Office: (970) 833-5494 / childcare@afterschoolkindness.com

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Name				Date o	of Birth	- <u></u>					
Parent/Guard											
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Hep B	Hepatitis B			1		1		1			
DTaP	Diphtheria, Tetanus, Pertussis (pediatric)	and an and a second second			and an and the second						
DT	Diphtheria, Tetanus (pediatric)							-			
Tdap	Tetanus, Diphtheria, Pertussis	and the second	and the second second second second	-				-			
Td	Tetanus, Diphtheria		all and the		al and						
				1995							
Hib	Haemophilus influenzae type b			-					t and an include		
IPV/OPV	Polio			-				-			
PCV	Pneumococcal Conjugate			1	1000 C	<u> </u>		-			
MMR	Measles, Mumps, Rubella			Healthcare F			1. 1				
Varicella	Chickenpox		Les and the second	Documentat	ion Date			Lab Verificati	ion Date		
	Vaccines recorded below	v this line are re	commended. R	ecording	g of dates	is enco	uraged.				
HPV	Human Papillomavirus				2.2.4	1					
Rota	Rotavirus		and the second s				a. 11				
MCV4/MPSV4	Meningococcal					2.5	2 . 4				
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After School Kindness, Inc. **State Required Childcare Immunization Form**

Table 1. MINIMUM NUMBER OF DOSES REQUIRED FOR CERTIFICATE OF IMMUNIZATION

VACCINE a	Level of School/Age of Student												
	Child Care 2–3 mos	Child Care 4–5 mos	Child Care 6–7 mos	Child Care 8–11 mos	Child Care 12–14 mos	Child Care 15–18 mos	Child Care 19–23 mos	Pre-school 2–4 yrs	K Entry 46 yrs	Grades K to 5 5–10 yrs	Grades 6 to 12 11–18+yrs	College	
Hepatitis B ^I	1	2	3						3	3	3		
Pertussis/Tetanus/ Diphtheria	1	2	3 see 4					5/4 ^b	5/4 ^{b c}	5/6 ° d			
Haemophilus influenzae type b (Hib) ^j	1	2	2	3/2	3/2	3/2/1	3/2/1	3/2/1					
Pneumococcal Conjugate ^k	1	2	3	12		4/3/2 see	footnote k		see pro				
Polio e	1	2			3				4/3 f	4/3 f	4/3 f		
Measles/Mumps/ Rubella 9					°. 1		see footnote g		2 ^h	2 ^h	2 ^h	2 ^{h i}	
Varicella ^m					1		see footnote n		2 ⁿ	2/1 n	2/1 n		
Meningococcal										-		0	

a: Vaccine doses administered no more than 4 days before the minimum interval or age are to be counted as valid. e: For polio, in lieu of immunization, written evi dence of a laboratory test showing immunity is acceptable.

counted as valid. b) Five doeses of perfussis, tetanus, and diphtheria vaccines are required at school entry in Colorado unless the 4th doese was given at 48 months of age or older (i.e., on or after the 4th birthday) in which case only 4 doese are required. There must be at least 4 weeks between dose 1 and dose 2, at least 6 months between dose 2 and dose 4, and at least 6 months between dose 4 and dose 5. The final dose must be diven on sconer than 4 wears of ane (dose motifies between cuses a and cuses a the final doce must be given no scorer than 4 years of age (doce 4 may be given at 12 months of age provided there is at least 6 months between dose 3 and dose 4). If a child has received 6 doses of DTaP before the age of 4 years, no additional doses are required.

age of 4 years, no additional doses are required. c: For students 7 years of age or doler who have not had the required number of pertussis doses, no new or additional doses are required. Any student 7 years of age or older at school entry in Colorado who has not completed a primary series of 3 appro-priately spaced doses of tetanus and diphtheria vac-che may be certified after the 3rd dose of tetanus and diphtheria vaccine (ro tetanus, diphtheria, and pertussis vaccine if 10 or 11 years) if it is given 6 months or more after the 2nd dose.

di The student must meet the minimum prior requirement for the 4th or 5th doses of diphtheria, tetanus, and pertussis vaccine and have 1 tetanus, diphtheria, and pertussis vaccine dose.

To represent the set of polio vaccine are required at school entry in Colorado unless the 3rd dose was given at 48 months of age or older (i.e., on or after the 4th birthday) in which case only 3 doses are required. There must be at least 4 weeks between dose 2 and dose dose 2, at least 4 weeks between dose 2 and dose 3 and at least 6 months between dose 3 and dose 4. The final dose must be given no sconer than 4 years of age. Minimum age/interval dose not apply if 4th dose of polio (3rd dose if given after 4th birth-day) was administered prior to July 1, 2009.

day) was administered prior to July 1, 2009.
g: For measles, mumps, and rubella, in lieu of immunization, written evidence of a laboratory test showing immunity is acceptable for the specific disease tested. The 1st does of measles, mumps, and rubella vaccine must have been administered at 12 months of age or older (i.e., on or after the 1st birthday) to be acceptable.
h: The 2nd dose of measles vaccine or measles, mumps, and rubella vaccine must have been administered at 12 mumps, and rubella vaccine does of measles vaccine or measles.
h: The 2nd dose of measles vaccine or measles, in unps, and rubella vaccine must have been administered at least 28 calendar days after the 1st dose.

i: Measles, mumps, and rubella vaccine is not required for college students born before January 1, 1957.

J: The number of Hib vaccine doses required depends on the student's current age and the age when the vaccine was administered. If any dose was given at 15 months of age or older, the Hib vaccine was

requirement is met. For students who began the series before 12 months of age, 3 doses are required of which at least 1 dose must have been administered at 12 months of age or older (i.e., on or after the 15 birthday). If the 1st dose was given at 12 to 14 months of age, 2 doses are required. If the current age is 5 years of age or older, no new or additional doses are required.

additional doese are required. k: The number of pneumococcal conjugate vaccine (PCV) doese required depends on the student's cur-rent age and the age when the 1st does was admin-istered. If the 1st does was administered before 6 months of age, the child is required to receive 3 doese 2 months apart and an additional dose between 12–15 months of age. If started between 7–11 months of age, the child is required to receive 2 doses 4 months apart and an additional dose between 12–15 months of age. If started between 7–11 months of age, the child is required to receive 2 doses, two months apart and an additional dose between 12–15 months of age. For any student who reterives the of dose on or after the first birthday, a th dose is not required. If these was given at 12 to 23 months of age. Zo months of age through 4 years of age the PCV vaccine requirement is met. If the current age is 5 years or older, no new or addi-tional doses are required.

to boost and equalities B, in lieu of immunization, written evidence of a laboratory test showing immunity is acceptable. The second dose is to be administered at least 4 weeks after the first dose, and the third dose js to be administered at least 16 weeks after dose is to be administered at least 16 weeks after the first dose and at least 8 weeks after the second

dose. The final dose is to be administered at 24 weeks of age (6 months of age) or older and is not to be administered prior to 6 months of age. Min-mum age/interval does not apply to those students who had 3 doses of the vaccine administered prior to July 1, 2009.

m: For varicella, written evidence of a laboratory m: For varicella, Written evidence of a laboratory test showing immunity or a documented disease history from a health care provider is acceptable. The 1st dose of varicella vaccine must have been administered at 12 months of age or older (i.e., on or after the 1st birthday) to be acceptable.

or after the 1st birthday) to be acceptable. n: If the second dose of varicella vaccine was administered to a child before 13 years of age, the minimum interval between dose 1 and dose 2 is three months, however, if the second dose is admin-istered at least 28 days following the first dose, the second dose does not need to be repeated. For a child who is 13 years of age or older, the second dose of varicella vaccine must have been adminis-tered at least 28 calendar days after the 1st dose. See Table 2 for the school years/grade levels that the 1st and 2nd doses of varicella will be required.

 Information concerning meningococcal disease and the meningococcal vaccine shall be provided to each new student or if the student is under 18 each new student or if the student is under 1% years, to the student's parent or guardian. If the stu-dent does not obtain a vaccine, a signature must be obtained from the student or if the student is under 18 years, the student's parent or guardian indicating that the information was reviewed

Table 2. TIMETABLE FOR IMPLEMENTATION OF REQUIREMENTS FOR SELECTED IMMUNIZATIONS FOR GRADES K TO 12

Refer to Table 1 for the minimum number of doses required for a particular grade level. Table 2 shows the year of implementation for a requirement from Table 1 and is restricted to varicella vaccine dose 1 (Var1) and dose 2 (Var2) and tetanus, diphtheria, and pertussis vaccine (Tdap). Requirements and effective dates for other vaccines are listed in Table 1. In this table, after a vaccine is required for grades K to 12, it is no longer shown, but the requirements listed in Table 1 continue to apply.

School Year	Grade Level												
	к	1	2	3	4	5	6	7	8	9	10	11	12
2007–08	Var2	Var1	Var1	Var1	Var1	Var1	Tdap Var1	Var1			Tdap		-
2008–09	Var2	Var2	Var1	Var1	Var1	Var1	Tdap Var1	Tdap Var1	Var1		Tdap	Tdap	
2009–10	Var2	Var2	Var2	Var1	Var1	Var1	Tdap Var1	Tdap Var1	Tdap Var1	Var1	Tdap	Tdap	Tdap
2010–11	Var2	Var2	Var2	Var2	Var1	Var1	Tdap Var1	Tdap Var1	Tdap Var1	Tdap Var1	Tdap Var1	Tdap	Tdap
2011–12	Var2	Var2	Var2	Var2	Var2	Var1	Var1	Var1	Var1	Var1	Var1	Var1	
2012–13 (Var1 required for grades K to 12)	Var2	Var2	Var2	Var2	Var2	Var2	Var1	Var1	Var1	Var1	Var1	Var1	Var1
2013–14	Var2	Var2	Var2	Var2	Var2	Var2	Var2						
2014–15	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2					
2015–16	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2				
2016–17	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	The last		
2017–18	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2		
2018–19	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	
2019–20 (Var2 required for grades K to 12)	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2	Var2