



MISSOURI VALLEY COLLEGE IMMUNIZATION REQUIREMENTS FOR STUDENTS



IMPORTANT

Activate your Missouri Valley College email account!

MVC REQUIRED IMMUNIZATIONS

MMR

MMR VACCINE
(MEASLES-MUMPS-RUBELLA)

2 Doses

1st dose- on or after
the 1st birthday

2nd dose- 28 days
after the first

TDAP

TDAP VACCINE
(TETANUS-DIPHTHERIA-PERTUSSIS)

1 Dose

1 dose within the last
10 years

MCV4

MCV4 VACCINE
(MENINGOCOCCAL ACWY)

1 Dose

Administration on or
after the 16th birthday

**Required for all students
residing on campus.
Off campus/commuting
students the MCV4 vaccine
is optional **

TUBERCULOSIS SCREENING -This questionnaire is in Med Proctor for all new students. Returning students will need to complete the tuberculosis screening from listed below each academic year.

Screening might indicate a need for TB testing (tuberculin skin test, blood test or chest x-ray)

Immunization records must be official documentation. This can include infant shot record book, records from a health care provider, local health department or pharmacy.

IMMUNIZATION EXEMPTION REQUEST

Students requesting medical or religious exemption for immunizations must reach out to the Student Health Nurses Office. Exemptions require a yearly physical examination completed by a physician. Physician must sign and stamp the form. For more details or to request an immunization exemption form email mvccampusnurse@moval.edu

MED PROCTOR

The MVC Nurses office uses an online service called Med+Proctor to manage students immunization records. MP makes it easy to track and verify that our students have the required vaccines before they can attend classes. Students will pay a one time fee of \$15.00 to Med Proctor before uploading their immunization documents. Students can use their personal or Missouri Valley College email address. Students will have lifetime access to these records through Med Proctor.

✱ Register with your personal or MVC school email account

FORMS REQUIRED BY THE MVC STUDENT HEALTH NURSES OFFICE

✱ **ALL New Students are required to complete these forms.** ✱

- [Consent for Treatment](#)
 - [Medical History](#)
 - [Emergency Contact](#)
 - [Immunizations](#)
 - [Tuberculosis Screening Form Questionnaire](#)
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DO I HAVE EVERYTHING COMPLETED FOR THE STUDENT HEALTH NURSES OFFICE?

- | | |
|--|---|
| <input type="checkbox"/> Activated MVC email | <input type="checkbox"/> Consent for Treatment Form |
| <input type="checkbox"/> Required Immunizations
- MMR, TDAP, MCV4 | <input type="checkbox"/> Medical History Form |
| <input type="checkbox"/> Registered & Uploaded
Immunization records into Med
Proctor | <input type="checkbox"/> Emergency Contact Form |