Department of Health and Environmental Control Regulation 61-8, Vaccination, Screening and Immunization For Students Regarding Contagious Diseases, May 19, 1981, requires this report to be completed and submitted to DHEC.

**THIS REPORT IS DUE 45 CALENDAR DAYS AFTER THE FIRST DAY OF CLASSES**

<table>
<thead>
<tr>
<th>NAME OF SCHOOL:</th>
<th>ADMINISTRATOR’S NAME:</th>
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<tbody>
<tr>
<td>ADDRESS:</td>
<td>CONTACT PERSON:</td>
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<th>GRADES IN YOUR SCHOOL (LOWEST TO HIGHEST):</th>
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1. Enter total number of students enrolled in **grades 5K-12** in this school.  
2. Enter total number of students enrolled in **grades 5K-12** in this school with a **S.C. CERTIFICATE OF IMMUNIZATION** (DHEC 1148) with any of the following: a) section 1b "Has received all Immunizations required for SCHOOL ENTRY" marked; b) DHEC 1125; c) the DHEC 1148 (dated 05/2005) printed from the Statewide Immunization Registry, with the notation at the top of the form "CERTIFICATE EXPIRES" equaling “Not Applicable”.  
3. Enter total number of students enrolled in **grades 5K-12** in this school with any of the following: a) DHEC 1148 with any of the exemptions (i.e., Catching Up, Medical Contraindication) marked; b) DHEC 1127; c) the DHEC 1148 (dated 05/2005) printed from the Statewide Immunization Registry with 1) the notation at the top of the form "CERTIFICATE EXPIRES" indicating a date or 2) "Medical Exemption" (located in center of form) completed.  
4. Enter total number of students enrolled in **grades 5K-12** in this school with a **S.C. CERTIFICATE OF RELIGIOUS EXEMPTION** (DHEC 1126).  
5. Enter total number of students enrolled in **grades 5K-12** in this school with a **S.C. CERTIFICATE OF SPECIAL EXEMPTION** (DHEC 1123).  
6. At the time of submission of this report (DHEC 1124), enter total number of students enrolled in **grades 5K-12** in this school that are suspended for failure to present appropriate certificates.  
7. Enter total of lines 2, 3, 4, 5, and 6. (This total should equal the number on line 1.)

**TO BE COMPLETED BY ALL SCHOOLS THAT HAVE STUDENTS ENROLLED IN 1ST GRADE.**

A. Enter number of students enrolled in 1st grade.  
B. Enter number of 1st grade students who are enrolled with a **S.C. CERTIFICATE OF IMMUNIZATION** (DHEC 1148) with either of the following: a) section 1b "Has received all Immunizations required for SCHOOL ENTRY" marked or b) the DHEC 1148 (dated 10/2006) printed from the Statewide Immunization Registry, with the notation at the top of the form "CERTIFICATE EXPIRES" equaling “Not Applicable”.

**TO BE COMPLETED BY ALL SCHOOLS THAT HAVE STUDENTS ENROLLED IN 5-YEAR KINDERGARTEN.**

A. Enter number of students enrolled in 5-year kindergarten.  
B. Enter number of 5-year kindergarten students who are enrolled with a **S.C. CERTIFICATE OF IMMUNIZATION** (DHEC 1148) with either of the following: a) section 1b "Has received all Immunizations required for SCHOOL ENTRY" marked or b) the DHEC 1148 (dated 10/2006) printed from the Statewide Immunization Registry, with the notation at the top of the form "CERTIFICATE EXPIRES" equaling “Not Applicable”.

**THIS REPORT MUST BE SIGNED BY THE SCHOOL ADMINISTRATOR**

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<tr>
<th>SCHOOL ADMINISTRATOR</th>
<th>DATE</th>
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(Instructions for Completing on Back)
SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL  
School Summary of Student Immunization Status (DHEC 1124)  
(Instructions for Completing)

PURPOSE:

To obtain the number of students enrolled in South Carolina schools that are adequately protected against certain vaccine-preventable diseases and to assist in quick identification of those not adequately protected. This information is extremely helpful in the event of a vaccine-preventable disease outbreak.

EXPLANATION AND DEFINITION:  
Item-By-Item Instructions:

**Name of School:** Enter full name of school.

**Administrator’s Name:** Enter name of School Administrator (i.e., Principal, Headmaster or Director).

**Address:** Enter full street and city address.

**School Telephone:** Enter school's telephone number.

**Contact Person:** Enter name of individual who can be contacted about this report.

**Grades In Your School (Lowest to Highest):** Enter lowest grade to highest grade.

1. Enter total number of students enrolled in **grades 5K-12** in this school.

2. Enter total number of students enrolled in **grades 5K-12** in this school with a S.C. CERTIFICATE OF IMMUNIZATION (DHEC 1148) with any of the following: a) section 1b “Has received all Immunizations required for SCHOOL ENTRY” marked; b) DHEC 1125; c) the DHEC 1148 (dated 10/2006) printed from the Statewide Immunization Registry, with the notation at the top of the form “CERTIFICATE EXPIRES” equaling “Not Applicable” (See DHEC 1148, Example #1).

3. Enter total number of students enrolled in **grades 5K-12** in this school with any of the following: a) DHEC 1148 with any of the exemptions (i.e., Catching Up, Medical Contraindication) marked; b) DHEC 1127; c) the DHEC 1148 (dated 10/2006) printed from the Statewide Immunization Registry with 1) the notation at the top of the form “CERTIFICATE EXPIRES” indicating a date (See DHEC 1148, Example #2) or 2) “Medical Exemption” (located in center of form) completed.

4. Enter total number of students enrolled in **grades 5K-12** in this school with a S.C. CERTIFICATE OF RELIGIOUS EXEMPTION (DHEC 1126).

5. Enter total number of students enrolled in **grades 5K-12** in this school with a S.C. CERTIFICATE OF SPECIAL EXEMPTION (DHEC 1123).

6. At the time of submission of this report (DHEC 1124), enter total number of students enrolled in **grades 5K-12** in this school that are suspended for failure to present appropriate certificates.

7. Enter total of lines 2, 3, 4, 5, and 6. (This total should equal the number on line 1.)

**TO BE COMPLETED BY ALL SCHOOLS THAT HAVE STUDENTS ENROLLED IN 1ST GRADE.**

A. Enter number of students enrolled in 1st grade.

B. Enter number of 1st grade students who are enrolled with a S.C. CERTIFICATE OF IMMUNIZATION (DHEC 1148) with either of the following: a) section 1b “Has received all Immunizations required for SCHOOL ENTRY” marked or b) the DHEC 1148 (dated 10/2006) printed from the Statewide Immunization Registry, with the notation at the top of the form “CERTIFICATE EXPIRES” equaling “Not Applicable” (See DHEC 1148, Example #1).

**TO BE COMPLETED BY ALL SCHOOLS THAT HAVE STUDENTS ENROLLED IN 5-YEAR KINDERGARTEN.**

A. Enter number of students in 5-year kindergarten.

B. Enter number of 5-year kindergarten students who are enrolled with a S.C. CERTIFICATE OF IMMUNIZATION (DHEC 1148) with either of the following: a) section 1b “Has received all Immunizations required for SCHOOL ENTRY” marked or b) the DHEC 1148 (dated 10/2006) printed from the Statewide Immunization Registry, with the notation at the top of the form “CERTIFICATE EXPIRES” equaling “Not Applicable” (See DHEC 1148, Example #3).

**Signature Of School Administrator:** The school administrator (i.e., Principal, Headmaster or Director) must sign this form.

**Date:** Enter the date the form was signed by school administrator.

**OFFICE MECHANICS AND FILING:**

Submit the original form to DHEC. Keep a copy of this report in the school file.

DHEC Staff Only: As subsequent reports are received, or a school permanently closes, any previous reports may be discarded.