

## Measles, Mumps, Rubella (“MMR”) Immunization Verification Form

ALL students are **REQUIRED** to provide proof of immunity to measles, mumps, and rubella (“MMR”).

Before students may enroll in classes, NAU requires documentation of **ONE** of the following:

- **Two (2) MMR vaccines (measles, mumps, and rubella) given on or after your first birthday, and the second given at least 28 days after the first; OR**
- **Laboratory test results showing immunity to measles, mumps, and rubella; OR**
- **Date of Birth before January 1, 1957**

It is **preferred** that documents are submitted electronically. Please go to [www.campushealth.nau.edu](http://www.campushealth.nau.edu)

After logging in, click on “Immunization Requirement” and follow the instructions.

If unable to submit electronically, you may send documentation by:

- Fax 928-523-4411
- Email [chs.records@nau.edu](mailto:chs.records@nau.edu)
- Mail Campus Health Services Immunizations, PO Box 6033, Flagstaff, AZ, 86011-6033

The following documentation is acceptable:

- This completed form, signed, dated, and **stamped** by your healthcare provider, OR
- A copy of your most up-to-date immunization record (obtained from your healthcare provider or school); OR
- A copy of your laboratory test results showing immunity to measles, mumps, and rubella

Northern Arizona University, the American College Health Association, and the U.S. Centers for Disease Control and Prevention **strongly recommend** that all college students be up to date on the following vaccines:

MENINGOCOCCAL ACWY (Meningitis)      MENINGOCOCCAL B (Meningitis)  
 TDAP (Tetanus, Diphtheria, and Pertussis)      HPV (Human Papillomavirus)

Also recommended are HEPATITIS A and B, VARICELLA, Covid 19 and an annual INFLUENZA vaccine. All of these vaccines are available by appointment for a fee at NAU Campus Health Services.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ MI: \_\_\_\_\_

NAU ID: \_\_\_\_\_ NAU e-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

REQUIRED IMMUNIZATIONS	Month	Day	Year
MMR #1: measles, mumps, rubella (given on or after 1 <sup>st</sup> birthday)			
MMR #2: measles, mumps, rubella (given at least 28 days later)			
<b>OR</b>			
If no MMR vaccination record is available, you may submit a copy of your MMR blood titers (immunity status)			

Healthcare Provider Signature (required): \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Healthcare Provider  
Office Stamp:  
(required)

Questions? Call the Immunization Desk at (928) 523-6359 or send an email to [chs.records@nau.edu](mailto:chs.records@nau.edu)