

Student Health Form/Mandatory Immunizations

Welcome to Ball State University. The health and safety of everyone at Ball State is very important, and you play a key role in the University's efforts to maintain a safe and healthy campus. To help protect the entire community, all students are required to complete and submit the Ball State University Student Health Form. If you are under 18 years of age when signing the form, it must also be signed by a parent or guardian.

This form is divided into two sections. You should provide all the information in Section One and sign where indicated. The immunization information in Section Two is required by state law and must be provided by your health care provider or by attaching a copy of your immunization record from your high school, college, or health department. The information on this form is strictly for the use of Ball State University Health Services and will not be released to anyone without your knowledge and consent.

Below are options to submit the completed form. After you make a copy for your records, you can:

1. Bring the completed form with you to Orientation and drop it off at the Health Center table
2. Scan it in and email it to healthrecords@bsu.edu
3. Fax to 765-285-1103
4. Mail to Ball State University Amelia T. Wood Health Center, 1500 W. Neely Avenue, Muncie, IN 47306.

SECTION ONE – COMPLETE THIS SECTION BEFORE GOING TO YOUR HEALTH CARE PROVIDER

Name: Last (Print)	First	Middle	(Maiden)	Date of Birth (month/day/year)
Preferred Name		Ball State ID Number		
<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Transgender <input type="radio"/> I identify as: _____				
Home Address: Number and Street		City	State	ZIP Code
Home Telephone Number		Student's Cell Phone Number		
Parent/Guardian's Name		Address	Telephone Number	
Parent/Guardian's Name		Address	Telephone Number	
Spouse's Name		Address	Telephone Number	
Please list any allergies you have to medications _____				
Please list current medications and dietary supplements _____				

IMPORTANT INFORMATION

Consent for Treatment

All students will be asked to complete a General Consent form and a Consent for Preferred Communications in order to receive services at the Health Center.

Students under 18 years of age, will need to have a parent or guardian complete these forms prior to their visit. These forms can be found on our website: www.bsu.edu/healthcenter on the Medical Records and Forms page.

Campus Health Care

To meet the health care needs of students, a clinic is conveniently located in the Amelia T. Wood Health Center at 1500 W. Neely Avenue. Available services include the main Health Center clinic and physical therapy. Any student who pays the Health Fee each semester is eligible for services. The fee covers basic professional services at the Health Center, including evaluation by a physician or nurse practitioner, diagnosis, and plan of care. The Health Fee does not cover the cost of prescriptions and lab tests. For additional information on the services and fees, visit bsu.edu/healthcenter. Copies of this form may also be downloaded from the site.

Health Insurance

It is highly recommended that all Ball State students have adequate health insurance, should services beyond those covered by the student Health Fee be required. It is also important to review your insurance plan for any requirements or restrictions that may impact the student's care.

For example, the requirements may designate which location or facility a student must use. They may be required to obtain approval from a designated primary care physician before the service is provided. Understanding the benefits and requirements of your insurance plan in advance will make it much easier if you need services outside of the Health Center.

If a student has health insurance coverage, it is important he or she has a current and updated card along with a prescription benefit card. It is a good idea to include a copy of the front and back of the insurance card and prescription benefit card when submitting this Student Health Form. It will be beneficial to have the documents available, as it is easy to overlook such details when sick or in need of care.

Special Needs and Accommodations

If you have a special health need, please contact the Ball State University Student Health Center at 765-285-8431 before your arrival.



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SECTION TWO – REPORT OF IMMUNIZATIONS

This page needs to be signed and dated by a health care provider, or the student may attach a copy of the immunizations report from his or her high school, college, or health department. The health information provided will not be released without the student's consent and will be used only as a background for providing health care.

(Please keep a copy of entire form for your records.)

Last Name (Print)

First Name

Middle Name

(Maiden)

Date of Birth: _____ / _____ /
(Month/Day/Year)

Ball State ID# _____

The "College Immunization Law" (IC21-40-5) and Ball State University requires immunizations as specified below for all matriculating students prior to the first day of classes.

College Immunization Requirements for Enrollment

(You must fulfill these requirements prior to the first day of classes)

1) MMR vaccination Both doses must be given after 1967 AND the first on or after the first birthday,* and the doses must be separated by at least 28 days.

vaccine 1 _____ / _____ / _____
Month Day Year

vaccine 2 _____ / _____ / _____
Month Day Year

OR

2) Measles (Rubeola) — Both doses must be given after 1967 AND the first on or after the first birthday,* and the doses must be separated by at least 28 days.

Must have two dates vaccine 1 _____ / _____ / _____
Month Day Year

vaccine 2 _____ / _____ / _____
Month Day Year

or

Has an immune titer (specify date of test) _____ / _____ / _____
Month Day Year

or

Born before January 1, 1957 — vaccine not required _____ Yes

3) Mumps — Both doses must be given after 1967 AND the first on or after the first birthday,* and the doses must be separated by at least 28 days.

Must have two dates vaccine 1 _____ / _____ / _____
Month Day Year

vaccine 2 _____ / _____ / _____
Month Day Year

or

Has an immune titer (specify date of test) _____ / _____ / _____
Month Day Year

or

Born before January 1, 1957 — vaccine not required _____ Yes

4) Rubella (German Measles) — Vaccine must be on or after first birthday*

_____ / _____ / _____
Month Day Year

or

Has an immune titer (specify date of test) _____ / _____ / _____
Month Day Year

Born before January 1, 1957 — vaccine not required _____ Yes

*4-day grace period.

5) Tetanus/Diphtheria Vaccine

Booster dose of Td/TdAP given within last 10 years _____ / _____ / _____
Month Day Year

6) Meningococcal Quad (ACWY) Vaccine

Two doses required if first
given before age 16 years, _____
one required after age
16 through age 21 years, _____
Dose 1 _____ / _____ / _____
Month Day Year
Dose 2 _____ / _____ / _____
Month Day Year

7) Meningococcal B Vaccine

Bexsero _____ / _____ / _____
Trumenba _____ / _____ / _____
(circle which given)
Required if under
age 24 years.

Dose 1 _____ / _____ / _____
Month Day Year
Dose 2 _____ / _____ / _____
Month Day Year

Required prior to first day of classes.

Recommended Immunizations:

Hepatitis-B (Series required for health care classes.)

Dose 1 _____ / _____ / _____
Month Day Year

Dose 2 _____ / _____ / _____
Month Day Year

Dose 3 _____ / _____ / _____
Month Day Year

Hepatitis-A

Dose 1 _____ / _____ / _____
Month Day Year

Dose 2 _____ / _____ / _____
Month Day Year

Polio

IPV/OPV _____ / _____ / _____
Month Day Year

Varicella

Dose 1 _____ / _____ / _____
Month Day Year

Dose 2 _____ / _____ / _____
Month Day Year

Note: This form needs to be signed and dated by a health care provider or attach a copy of your immunizations from your high school, college, or health department.

Health Care Provider Signature _____

Health Care Provider Printed Name _____

Date _____

Address _____

Telephone Number _____

Ball State University Amelia T. Wood Health Center
1500 W. Neely Ave.
Muncie, IN 47306-0815

**If you have any questions, please contact the
Ball State University Student Health Center at
765-285-8431.**



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