



# Military Certification of South Carolina School and Childcare Immunization Requirements

- (1) Complete name and date of birth.
- (2) Select one immunization status option.
- (3) Sign form.
- (4) Staple to the DD-2766-C or P-0630 form

1	Child/ Student Name: _____
	Child/ Student Date of Birth: _____

*Select one of the Immunization Status options*

2	<input type="checkbox"/>	Meets all SC <b>School</b> Requirements
	<input type="checkbox"/>	Meets all SC <b>Childcare</b> Requirements
	<input type="checkbox"/>	Does NOT meet all immunization requirements for school or childcare Next date vaccination(s) due: _____*
	<input type="checkbox"/>	Permanent Medical Exemption to the following vaccine(s): _____ _____ _____
<input type="checkbox"/>	Temporary Medical Exemption to the following vaccine(s) until designated date: Vaccine _____ Date* _____ _____ _____	

3	Provider Signature (or designee): _____ <span style="margin-left: 300px;">DO NOT USE STAMP</span>
	Date: _____

\*Child may attend childcare or school for no more than one month from this date

Military Certification of South Carolina School and Childcare Immunization  
Requirements Instructions for Completing DHEC 4375

Purpose

To provide documentation regarding SC immunization requirements and supplements the DD-2766-C and P-0630 military forms.

To be completed by the healthcare provider or designee.

Section 1

Complete the child's name and date of birth.

Section 2

Check the immunization status that is applicable to the child. **Only one option can be selected.**

- If a child does not meet all immunization requirements for school or childcare, the provider should enter the date when the next immunization is due.
- If a child has permanent vaccine exemptions, the provider should enter the vaccine(s) for which the child has a permanent exemption.
- If the child has temporary vaccine exemptions, the provide should enter the vaccine(s) for which the child has a temporary exemption and the date the exemption would be complete.
- Children who require additional vaccines or have temporary exemptions may attend childcare or school for no more than one month from the date designated.

Section 3

The healthcare provider (or designee) must sign and date the form. Stamps are not accepted.

The form must be stapled to the DD-2766-C or P-0630 form.

Office Mechanics:

This form is provided to the daycare or school. It is not retained by the DHEC Health Department.