

RETURN THIS FORM TO:
Student Health Services
P.O. BOX 9038

GRAND FORKS, ND 58202

Dear University of North Dakota Student,

Congratulations on your acceptance into the University of North Dakota. Student Health Services wish you the best of luck and success in your quest for scholarship.

The North Dakota State Board of Higher Education mandates that certain requirements are met before enrolling at this institution. Please fully complete this form and return to The University of North Dakota Student Health Services. Please be certain to return this form to Student Health Services and not to the registrar's office with your registration and admissions correspondence.

The University of North Dakota Student Health Services Pre-entrance Health Record:

 All information fields on this form are required-including parent/guardian and next of kin/spouse information.

Health Insurance Information

• Health insurance is highly recommended at the University of North Dakota. If you do not have a health plan, please request insurance information from Student Health Services about University sponsored low-cost health insurance plans.

Privacy Statement:

• The Health Insurance Portability and Accountability Act (HIPAA) require that all healthcare agencies provide a written copy of the patient's right to privacy. A privacy statement will be furnished to you at your initial visit to Student Health Services.

Immunization Record:

Documentation of required immunizations must be provided by either ahealthcare provider or a Public Health Authority. Any immunizations submitted without the proper signatures will be returned for compliance.

- Immunization information is required for entrance into the University of North Dakota. Any student who is noncompliant <u>will not</u> be allowed to register for classes. The following immunizations are required under the University of North Dakota bylaws and the state of North Dakota Board of Higher Education.
 - The Measles, Mumps and Rubella (MMR) vaccine. Two doses <u>are required</u>, unless you were born before 1957.
- The following immunizations are recommended for students entering into a university setting.
 - Meningococcal
 - o Tetanus Diphtheria (Td) booster (every ten years)
 - o Hepatitis B (in some cases the Hepatitis B vaccine is required for the degree sought)
 - Annual influenza vaccinations

Tuberculosis Screening

- Results of tuberculosis screening should be completed by a clinician or health department in the appropriate section of your pre-admission health history and immunization information form.
- The tuberculosis screening must be accompanied by a signature indicating that the test was read by a medical professional.
- International students are required to have their tuberculosis skin testing completed and read in the United States by a healthcare provider or by Public Health.

If you have any questions about the information contained on the pre-admission health history and immunization information form, please contact our office at 701.777.4500 our fax number is 701.777.4835. Or visit our website at http://www.undstudenthealth.com.

Alan Allery, Director Student Health Services