



CENTRAL STATES ROTARY YOUTH EXCHANGE PROGRAM, INC.

SERVING 18 DISTRICTS IN ILLINOIS, INDIANA, MICHIGAN,
MINNESOTA, NORTH DAKOTA, WISCONSIN AND ONTARIO. CANADA
5580, 6220, 6250, 6270, 6290, 6310, 6330, 6360, 6400,
6420, 6440, 6450, 6460, 6490, 6510, 6540 6560, 6580



CERTIFICATE OF IMMUNIZATION

This will certify that _____
Name of Student

Date of Birth ____/____/____
Day Month Year

Has been successfully immunized against the following diseases on the dates shown.

Show dd/mm/yyyy for all immunizations

DIPHTHERIA				
PERTUSSIS (Whooping Cough)				
TETANUS				
POLIO				
HEPATITIS "B"				
VARICELLA (Chicken Pox)				
RUBELLA (Three day measles)			XXXXXXXX	XXXXXXXX
RUBEOLA (Regular measles)			XXXXXXXX	XXXXXXXX
MUMPS			XXXXXXXX	XXXXXXXX
T. B. TEST		Result		XXXXXXXX
B CC G-France		XXXXXXXX	XXXXXXXX	XXXXXXXX

For Students placed in Wisconsin Rubella, Rubeola and Mumps must have been administered at age 13 or older.

Signature of Medical Doctor

Street Address

City, State or Province, Country