

MENINGOCOCCAL VACCINE NOTIFICATION

Following is State of Georgia legislation concerning meningitis information and vaccination for college students:

“Every public and nonpublic postsecondary educational institution shall provide to each newly admitted freshman or matriculated student residing in campus housing as defined by the postsecondary educational institution, or to the student’s parent or guardian if the student is a minor, the following information:

- *Meningococcal disease is a serious disease that can lead to death within only a few hours of onset; one in ten cases is fatal; and one in seven survivors of the disease is left with a severe disability, such as the loss of a limb, mental retardation, paralysis, deafness, or seizures;*
- *Meningococcal disease is contagious but a largely preventable infection of the spinal cord fluid and the fluid that surrounds the brain;*
- *Scientific evidence suggests that college students living in dormitory facilities are at a moderately increased risk of contracting meningococcal disease; and*
- *Immunization against meningococcal disease will decrease the risk of the disease.”*

Students enrolled at a post-secondary institution shall be required to sign documentation that they have been provided information concerning the risks associated with meningococcal disease as required by the State of Georgia. If the student is a minor (under 18 years of age), only a parent or guardian may sign such documentation.

Printed Name _____

Last First Middle Date

I have read the law concerning meningococcal disease and understand the risks involved if contracted. I understand the meningococcal meningitis vaccine is 85 to 100 percent effective against four of the five most common strains of the bacteria that cause meningococcal meningitis and that studies show that up to 80% of cases on college campuses are vaccine preventable.

By signing this statement, I hereby release Emmanuel College from liability should I become infected and choose to not receive vaccination by a physician or health department OR I have received vaccination against meningococcal disease not more than 5 years prior to the first day of enrollment at Emmanuel College.

Signed: _____ Date _____

Student or Parent/Guardian of a minor

PLEASE RETURN TO: EMMANUEL COLLEGE
REGISTRAR’S OFFICE
PO BOX 129
FRANKLIN SPRINGS, GA 30639
FAX: 762-847-7011