

Bacterial Meningitis Upload Guide

Key Notes Regarding Bacterial Meningitis Requirements

- Beginning January 2014, [Texas State Law SB 62](#) mandates that all entering students under the age of 22 submit:
 - ✓ a certificate signed by a health care provider or,
 - ✓ an official immunization record verifying vaccination against bacterial meningitis, or has received a booster during the five years prior to registration,
 - ✓ proof of approved conscience exemption from the Texas Department of State Health Services.

The Compliance Form

Please be sure to include the type of vaccine received on the form or your vaccine record with the form.

<https://uh.edu/academics/courses-enrollment/policies/immunization/BacMen%20Compliance%20-%20May%202015.pdf>

Fax to: 713-743-8336 Mail This Form to: University of Houston, Office of Admissions, Welcome Center, 4400 University Drive, Houston, TX 77204-2023
 Email This Form to: admissions@uh.edu or Email Delivery to: UH Main Campus, Welcome Center, Building 553, <https://www.uh.edu/academic/building/553>

UNIVERSITY of HOUSTON

PROOF OF BACTERIAL MENINGITIS IMMUNIZATION COMPLIANCE

Please read the immunization requirements prior to completing this form.
 ALL applicable sections should be completed prior to printing.

STUDENT INFORMATION			
University of Houston ID # (myUH ID)	Date of Birth (MM/DD/YYYY)	Enrollment Term (Semester and Year)	
Last Name	First Name	MI	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Mailing Address		Apartment #	Phone Number
City	State	Zip Code	
Student Status: <input type="checkbox"/> New to UH <input type="checkbox"/> Returning (Not enrolled for less than 1 year) <input type="checkbox"/> Re-admit (Not enrolled for more than 1 year)			Email Address

SELECT OPTION 1 OR 2

OPTION 1: Select type of attachment

A COPY of your official immunization record signed by a Health Care Provider
 Documentation must be in English or accompanied by a notarized translation

Medical Exemption Affidavit or Certificate (The law requires that you visit a doctor in the U.S. to be able to get an exemption for medical reasons.)

Texas Department of State Health Services Exemption Form (For reasons of conscience including religious beliefs)

Submit ORIGINAL only, a copy will not be accepted

OPTION 2: Physician or Other Health Care Provider Must Complete A or B

A: Vaccination Date: _____ Vaccine: _____ Type: MCV4 MPSV4 As recommended by the CDC
<http://www.cdc.gov/vaccines/imz/downloads/061006a.html>

PLEASE DO NOT SIGN THE COMPLIANCE FORM UNLESS THE STUDENT HAS PROPER VACCINES OR IMMUNE TESTS.

Signature of Physician or Other Health Care Provider: _____ Date: _____

Please print name, office address, phone number and the state where licensed and license number.

B: BACTERIAL MENINGITIS MEDICAL EXEMPTION

IN THE OPINION OF THE PHYSICIAN, THE BACTERIAL MENINGITIS VACCINATION REQUIRED WOULD BE INJURIOUS TO THE HEALTH AND WELL-BEING OF THE STUDENT AND SHOULD NOT BE ADMINISTERED AT THIS TIME.

Signature of Physician or Other Health Care Provider: _____ Date: _____

I have read and understand the Bacterial Meningitis Immunization requirements. I certify that, to the best of my knowledge, the above information (including any attached copies) is true and correct. I also give my consent for the above immunization record to be entered into my student record.

Student's Signature - REQUIRED: _____ Date: _____

MINORS: Students under 18 Years of Age

Signature of Parent or Legal Guardian - REQUIRED if student is under 18 Years of Age: _____ Date: _____

Printed Name of Parent or Legal Guardian: _____ Relationship to Student: _____

Bacterial Meningitis Immunization Record
 OIG-5-2010-02 Make a copy of your immunization documentation for your records.
 The university does not provide copies of immunization record submissions.

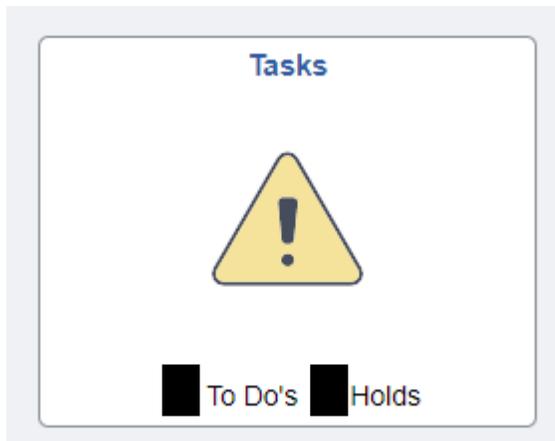
Step 1: Navigate to the “Tasks” Tile

- Log into Access UH- <https://accessuh.uh.edu/>
- Click the MyUH Self Service Tab



myUH Self Service

- Click on the “Tasks” tab on Student Home to access the UH Bacterial Meningitis Immunization Certificate



Step 2: Click on “UH Bacterial Meningitis Immunization Certificate”

To Do List

3 rows

Task	Institution	Due Date	Status	
UH Bacterial Meningitis Immunization Certificate	University of Houston		In Progress	>

Step 3: Click “Next” to Navigate to the Upload tab

After reading the introduction, click



Step 1 of 3: Introduction



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Beginning Jan. 2014, [Texas state law \(SB 62\)](#) mandates that all entering students under the age of 22 provide a certificate signed by a health care provider or an official immunization record verifying that a student has been vaccinated against bacterial meningitis, or has received a booster during the five years prior to registration.

- A [Proof of Bacterial Meningitis Immunization Compliance Form](#) containing the required information with the signature or stamp of a physician or his/her designee, or public health personnel*. The form must be completed fully, including the month, day, and year the vaccination dose or booster was administered.
- An official immunization record generated from a state or local health authority. Documentation must be in English and submitted with the [Proof of Bacterial Meningitis Immunization Compliance Form](#).
- A [Texas Department of State Health Services](#) conscience exemption form
- An official record received from school officials, including a record from another state

All documentation must include the month, date, and year that the vaccine or booster dose was administered.

Step 4: Click “Attach File” to attach the file

Click the “Attach File” button for the “File Attachment” pop up. Select “My Device” then choose the file that you would like to upload from your saved files.

Attach File

File Name	Uploaded DateTime	View	Delete
1 [REDACTED]	04/04/23 2:29PM	View	Delete

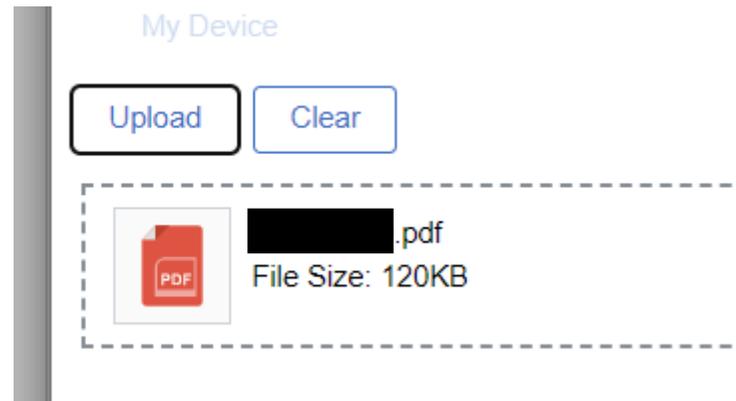
Submit

Choose From



My Device

Step 5: Click “Upload” then “Done”



Step 6: Upload your documentation and click “Submit” then “Next”

[< Previous](#) [Next >](#)

[Attach File](#)

	File Name 	Uploaded DateTime 	View	Delete
1	[REDACTED]	04/04/23 2:29PM	View	Delete

[Submit](#)



Step 7: Click “Submit” one more time!

[← Previous](#) [Submit](#)

Step 3 of 3: Complete Task



University Registrar
Office of the Provost



Step 8: Monitor your email for the completion notice and all updates!

You will receive email notifications for the following:

- The task is assigned (action required)
- The task is completed
- The upload is approved, and the hold is removed
- The upload is denied, and a new task is assigned

If you have any questions or concerns, email us at uhour@uh.edu.



University Registrar

Office of the Provost