UNIVERSITY OF NEBRASKA
NEBRASKA COLLEGE OF TECHNICAL AGRICULTURE
Pre-Enrollment Health Requirement

Name: Last  First  Middle  Date of Birth  NU Student ID Number

Local Address:  City, State, Zip  Contact Phone Number

Permanent Address  City, State, Zip  Email Address

REQUIRED IMMUNIZATIONS FOR NEBRASKA COLLEGE OF TECHNICAL AGRICULTURE STUDENTS

I understand I am required to submit a copy of previous immunizations (i.e. school record or from your healthcare provider).

Rubeola Measles Immunity

☐  _______________ First MMR (measles mumps rubella). Must be after first birthday and 1-1-1968.

   Month   Day    Year

☐  _______________ Second MMR (measles mumps rubella). No sooner than 30 days after first MMR.

   Month   Day    Year

OR

☐  _______________ Blood Test for Rubeola Measles. A copy of test results is required and must be attached to this form.

   Month   Day    Year

OR

☐  Born before January 1, 1957 (You do not have to submit records or additional information.)

Students not actually taking classes on campus (distance students) do not need to complete the form until a class is taken on campus.

Signature of Parent or Student or Licensed Care Provider  Date

REQUIRED OF INTERNATIONAL STUDENTS

- All new international students are required to have a test for tuberculosis and submit the results to NCTA.
- If your test for tuberculosis is positive, you will be required to have a chest x-ray.

MENNINGOCOCCAL Nebraska state law requires postsecondary institutions to provide students and parents information related to meningococcal disease.

☐ I have read the information on Meningococcal disease. (Website:  [www.cdc.gov/meningitis/index.htm](http://www.cdc.gov/meningitis/index.htm))

☐ Yes, I have been vaccinated.  _____________________  ☐ No, I have not been vaccinated

   Month   Day    Year

Return form to:

NCTA
Office of Student Services
404 East 7th
Curtis, NE  69025