

**Letter to 11<sup>th</sup> Grade Parents/Guardians  
Meningococcal Vaccine**

**TO: Parents/Guardians**

**FROM: School Health Clinic**

**DATE: \_\_\_\_\_**

**SUBJECT: Meningococcal Vaccine**

Dear Parents/Guardians,

Beginning with the 2016-2017 school year, the Ohio Department of Health School Immunization Requirements have been revised to include two (2) doses of Meningococcal (MCV4) vaccine to be administered before a student enters the 12<sup>th</sup> grade.

The second (2<sup>nd</sup>) dose of MCV4 must be administered on or after the 16<sup>th</sup> birthday with at least eight (8) weeks between the first (1<sup>st</sup>) and second (2<sup>nd</sup>) dose. If the first dose of MCV4 was administered on or after the 16<sup>th</sup> birthday a second dose is not required. If a pupil is in the 12<sup>th</sup> grade and is 15 years of age or younger, only one (1) dose is required.

Therefore, your current 11<sup>th</sup> grader will need to show proof of having received the Meningococcal (MCV4) vaccine(s) before they can return to school in the fall.

You are receiving this letter now to provide you with ample time to have your child immunized before the coming school year begins. Please contact your physician or health department to schedule an appointment.

Please provide the date that your child received the vaccine(s).

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\_\_\_\_\_ received the Meningococcal (MCV4) vaccine  
(Name)

on \_\_\_\_\_ and \_\_\_\_\_  
(Date) (Date)

\_\_\_\_\_  
Signature