

This document describes **how to sort each child into a category at the time of online reporting** (not to be used for initial screening for admission). Information for this report must be obtained from the California School Immunization Record ([Blue Card- CDPH286](#)) or equivalent record.

### Reporting Tools:

- [California Immunization Handbook](#)
- Guide to Immunizations Required [Pre-Kindergarten \(Child Care/ Preschool\)](#)
- Worksheet [xls](#) | [pdf](#)
- Reporting [FAQs](#)

### 1) Review each child's Blue Card


Determine the immunization status for each child **individually**, by placing each Blue Card into its appropriate pile based on child's status, starting with either:

- 7 group piles: "All Required Vaccine Doses", "PBE", "PME", "Other", "Conditional", "TME" or "Overdue"
- 2 group piles: "All Required Vaccine Doses" and "Missing Doses". Then sort children with "Missing Doses" into their 6 separate piles: "PBE", "PME", "Other", "Conditional", "TME" or "Overdue"

**Only report for children who are preschool aged: 2-5 years**

Use the worksheet to list each student and mark their reporting status at the time of reporting. Most students have "All Required Vaccine Doses" and will fall into pile A (letters refer to the worksheet and marked Blue Card example below). Students should be counted in B, C, D, E, F, or G only if the student is missing one or more required immunizations.

State of California—Health and Human Services Agency
California Department of Public Health



## CALIFORNIA PRE-KINDERGARTEN AND SCHOOL IMMUNIZATION RECORD

Pre-kindergarten facility and school staff must record the required vaccine dose information and status of requirements for each pupil. *See reverse side for guidance.*

PUPIL NAME (LAST, FIRST, MIDDLE)  <div style="text-align: center;">I</div>	STATEWIDE STUDENT IDENTIFIER (SSID) _____	ETHNICITY <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Non-Latino	RACE <input type="checkbox"/> African-American/Black <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other _____
NAME OF PARENT/GUARDIAN (LAST, FIRST)	BIRTHDATE (MONTH/DAY/YEAR) ____/____/____	SEX ____	

REQUIRED VACCINE	DATE EACH DOSE WAS GIVEN (MM/DD/YY)					Permanent Medical Exemption	Notes for School Requirements
	1 <sup>ST</sup>	2 <sup>ND</sup>	3 <sup>RD</sup>	4 <sup>TH</sup>	5 <sup>TH</sup>		
IPV / OPV (Polio)			Age: _____ years			<input type="checkbox"/>	4 doses meet TK/K-12 requirement, as do: 3 doses, if ≥1 dose given at age ≥4 years.
DTaP / DTP – Age 0-6 years Tdap / Td – Age 7+ years (Diphtheria, Tetanus, Pertussis)			Age: _____ years	Age: _____ years		<input type="checkbox"/>	5 doses meet TK/K-12 requirement, as do: 4 doses, if ≥1 dose given at age ≥4 years; 3 doses, if ≥1 Tdap dose at age ≥7 years; Tdap dose may meet 7 <sup>th</sup> Grade requirement.
MMR (Measles, Mumps, Rubella)	Age: _____ months					<input type="checkbox"/>	2 doses meet TK/K-12 requirement. Doses must be given at age ≥1 year.
Hib (Haemophilus influenzae type b)						<input type="checkbox"/>	Required for pre-kindergarten only. At least 1 dose must be given at age ≥1 year.
Hep B (Hepatitis B)						<input type="checkbox"/>	3 doses meet TK/K-12 requirement.
VAR / VZV (Varicella or Chickenpox)						<input type="checkbox"/>	2 doses meet TK/K-12 requirement.
Tdap – 7 <sup>th</sup> Grade (Tetanus, Diphtheria, Pertussis)	Age: _____ years					<input type="checkbox"/>	1 dose given at age ≥7 years meets requirement for 7 <sup>th</sup> grade advancement and 7 <sup>th</sup> -12 <sup>th</sup> grade admission.

STATUS OF REQUIREMENTS	Staff Initials / reviewed pupil's immunization record	Requires Follow-up				Follow-up Date(s) (See conditional admission schedule or exemption end date)	Other See codes on reverse side	Date Requirements Met
		Has All Required Vaccine Doses	Temporary Medical Exemption	Missing Doses Not Currently Due—Conditional	Missing Doses Are Overdue—Needs Doses Now			
Pre-Kindergarten (Child care or preschool)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> IEP <input type="checkbox"/> PBE (pre-2016)	
TK/K-12		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> IEP <input type="checkbox"/> IND <input type="checkbox"/> Home <input type="checkbox"/> PBE (pre-2016)	
7 <sup>th</sup> Grade (Advancement or admission)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> IEP <input type="checkbox"/> IND <input type="checkbox"/> Home	

Place each student in one of the categories below:

Only report for children who are preschool aged: 2-5 years

**UNCONDITIONAL ADMISSION:**

**Requirements Met**

**1 All Required Vaccine Doses (A)**

- Students who are immunized with all required doses have a single check in “has all required vaccine doses” under the “Status of Requirements” section of the Blue Card.
- Do not include students who have proof of disease for chickenpox. Please see criteria for permanent medical exemptions.

**Requirements Met, But Missing Doses**

**1 PBE- Personal Belief Exemption pre-2016 (B)**

- Submits a personal beliefs exemption (PBE) filed at a prior California child-care facility for missing shot(s) and immunization records with dates for all required shots not exempted. The PBE must have been filed before January 1, 2016 in accordance with Health and Safety Code section 120335 and is only valid until entry to transitional kindergarten/ kindergarten.

**1 PME- Permanent Medical Exemption (C)**

Issued in 2021:

- Submits a medical exemption issued in CAIR-ME for one or more required vaccines and immunization records with dates for all required shots not exempted.

Issued before January 2020:

- Submits a licensed physician’s written statement of a permanent medical exemption for one or more required vaccines and immunization records with dates for all required shots not exempted ([17 CCR section 6051](#)).

Medical exemption documentation should be used for a child who had chickenpox disease that was documented by a physician.

**1 Other (F):**

- Preschools may contact their authorized local educational agency (LEA) for additional information about these categories.
- Only use if students do NOT have All Required Vaccine Doses, a temporary medical exemption or conditional admission and WHO ARE:  
[F1. Accessing special education or related services required by their individualized education program \(IEP\)](#)

**CONDITIONAL ADMISSION, NEEDS FOLLOW-UP:**

**1 Conditional – Missing Doses Not Currently Due (B)**

- If a child is missing a dose(s) in a series but no immunizations are currently due.
- Commenced receiving doses of all the vaccines required ([table](#)) and is not currently due for any doses at the time of reporting (as determined by intervals listed in Conditional Admission Schedule, column entitled “EXCLUDE IF NOT GIVEN BY”)
- No longer includes homeless and foster students who are awaiting records at time of reporting. Please see Overdue.

**1 TME- Temporary Medical Exemption (D)**

Issued in 2021:

- Submits a TME issued in CAIR-ME for one or more vaccines and has submitted immunization records for vaccines not exempted.

Issued before January 2020:



- Submits a TME for one or more vaccines and has submitted immunization records for vaccines not exempted ([17 CCR section 6050](#)).
- The statement must indicate which immunization(s) must be postponed and when the child can be immunized.

**REQUIREMENTS NOT MET, MISSING DOSES, NEEDS FOLLOW-UP:**

**❶ Overdue- Needs Doses Now (G)**

- Out of compliance, missing doses are overdue. Child may not attend school until overdue doses are received. The deadline listed in Conditional Admission Schedule, column entitled “EXCLUDE IF NOT GIVEN BY” ([table](#)), has passed.
- Homeless and foster students (allowed initial enrollment without records) counted here if still in the process of meeting requirements/waiting for records. If students do not have records, count the student as missing all doses.

## 2) Tally each child’s Reporting Status on the Worksheet

### On the Worksheet...

- List each student and check the designated box of their status.
- For students missing any doses, tally which vaccine(s) are missing.
  - If the student is not missing any vaccine(s) leave the vaccines missing blank.

**❶ Missing Doses by Vaccine:**

- Count the total of all children (B, C, D, E, F and G) who do not have “All Required Vaccine Doses”.
- List each student missing any doses and check the designated box of their reporting status.
- Tally which vaccine(s) are missing. If the student is not missing any vaccine(s) leave the worksheet blank.
- Total the columns for the number of children in each reporting category and total number of children missing each vaccine. The total of A+ B + C + D + E+ F+ G must be equal the total enrollment since each child is only in one group.
  - The total number of students missing polio, DTaP, MMR, Hep B, Varicella or Hib vaccine must not exceed the number of children missing immunizations for any reason.
  - In the example below, 4 students are missing doses. Each individual vaccine missing (Polio, DTaP, MMR, Hep B, Varicella, Hib) can only total up to 4.



Total Number of Students* <div>5</div> ages 2-5  ID		All Req Vac Doses	MISSING DOSES											
			PBE (pre-2016)	PME	IEP	Conditional	TME	Overdue	— vaccine(s) missing					
					Other				Polio	DTaP	MMR	HepB	VAR	Hib
1.	Maria Alpha (Conditional)						x		x	x			x	x
2.	Peter Bravo (PME)			x					x				x	
3.	Amber Charlie (Overdue)							x		x			x	
4.	Robert Delta (TME)						x				x		x	
5.	Kristen Echo (All Req Vac Doses)	x												
*Total # Students ages 2-5 = A+ B+C+D+E+F+G		A	E	C	F1	B	D	G	Polio	DTaP	MMR	HepB	VAR	Hib
TOTAL		1	0	1	0	1	1	1	2	2	2	0	4	1

Retain the worksheet for your records in case of audit and as a roster of students who do not meet all immunization requirements in the event of an outbreak.

Note for children meeting criteria of multiple categories:

- If a student has an exemption and is also a conditional entrant, please report the student as having the exemption only.
- Only place a child in "Other" if they do not fit in any other category.
- Email [SchoolAssessments@cdph.ca.gov](mailto:SchoolAssessments@cdph.ca.gov) with reporting questions or challenging cases.

### 3) Submit Report at <https://reporting.shotsforschool.org/CC/login.aspx>

- To log-in, **confirm** your Child Care Center Preschool DSS Facility Number.
  - Please speak with your site administrator to obtain, or you may search through the [Department of Social Services- Facility Search](#)—Choose Facility Type: Child Care Center Preschool (serves ages 2-5). Also try using the drop-down menu on the reporting site and see [FAQ1](#).
- Once logged in, confirm your
  - School Information and Contact Information
- Submit Report using the totals from your worksheet. Fill out all required fields to complete the reporting form.
  - If there are no students in a particular category or if the category is not applicable, place a zero in the box.
  - Changes can be made up until reporting closes. Log in again and click "Revise Your Submitted Report" to make modifications.

#### Login

Facility Number

9 digits

Password

shotsforschool

Login

[Forgot Password?](#)



### Submit Report

Facility Name: Example report screen matches worksheet example  
Facility Number:

Total Number of Children:   
Report on ages 2-5 years

Account for each student in **one** of the categories below.

#### UNCONDITIONAL ADMISSION:

##### Requirements Met

☒ All Required Vaccine Doses A

##### Requirements Met, But Missing Doses

☒ Personal Belief Exemption E   
Pre-2016

☒ Permanent Medical Exemption C   
Includes MD/DO verification of varicella disease

☒ Other: IEP Services F1

#### CONDITIONAL ADMISSION, NEED FOLLOW-UP:

☒ Conditional- Missing Doses Not Currently Due B

☒ Temporary Medical Exemption D

#### REQUIREMENTS NOT MET, MISSING DOSES, NEED FOLLOW-UP:

☒ Overdue Doses G   
Includes homeless or foster care students in process of locating records

##### ☒ Missing Doses By Vaccine

☒ 4 Students are missing doses.

Total number of students missing each vaccine(s)

Polio  Hep B

DTaP  Varicella

MMR  Hib