LEA: 1608023

School Medical Immunization

ANNIE CAMP JUNIOR HIGH SCHOOL

2024 - 2025

County: CRAIGHEAD

					Section II - Exemptions									
Α	В	C D E F G H I J K										М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
07	235	229	233	233	232	230	196	187	NA	181	0	2	1	3
	~		7			Had Disease			<u>`</u>					

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
07	51	184	0	0

LEA: 1608023

School Medical Immunization

ANNIE CAMP JUNIOR HIGH SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
08	228	222	223	221	223	221	213	212	NA	207	1	0	3	4
		-	2	~		Had Disease		2 Doses*						

0

*MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

0

1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
08	15	211	2	0

LEA: 1608023

School Medical Immunization

ANNIE CAMP JUNIOR HIGH SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	C D E F G H I J K										М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
09	230	225	225	226	224	219	217	203	NA	209	0	0	1	1
			2			Had Disease		2 Doses*			-			
						0		0	1					

*MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
09	19	210	1	0

LEA: 1608024

School Medical Immunization

Cycle: 3

2024 - 2025

County: CRAIGHEAD

	Section I - Number of Students Meeting Requirements											Section II - Exemptions				
Α	В	C D E F G H I J K								К	L	М	N	0		
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt		
07	258	257	257	258	257	255	255	254	NA	252	0	1	3	3		
	·		2	·		Had Disease			×			7	~			
						0										

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
07	3	255	0	0

LEA: 1608024

School Medical Immunization

County: CRAIGHEAD

Cycle: 3

DOUGL	DUGLAS MACARTHUR JUNIOR HIGH SCHOOL 2024 - 2025													County: CRAIGHEAD					
				Sectio	on I - Numb	er of Studen	ts Meeting	Requirement	S		Section II - Exemptions								
Α	В	С	D	E	F	G	H I J			к	L	М	Ν	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt					
08	249	244	248	248	249	247	248	248	NA	242	1	0	0	1					
				~		Had Disease		2 Doses*				2							

0

*MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

1

1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
08	6	243	0	0

LEA: 1608024

DOUGLAS MACARTHUR JUNIOR HIGH SCHOOL

School Medical Immunization 2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
09	244	239	241	242	243	242	240	236	NA	235	0	1	1	2
			7.	·	·	Had Disease		2 Doses*						

0

*MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

0

1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
09	7	237	0	0

LEA: 1608020

School Medical Immunization

County: CRAIGHEAD

Cycle: 3

HEALTH, WELLNESS & ENVIRONMENTAL STUDIES MAGNET 2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	C D E F G H I J K										N	0
Grade	Total Enrolled		DTaPIPV/OPVHepBMMRVaricellaTDAPMCV4HepAAllDoses3 Doses3 Doses2 Doses2 DosesN/AN/A1 DoseRequirements								Code M	Code R	Code P	Total Exempt
01	115	109	115	114	113	113	NA	NA	113	108	0	0	0	0
	~		Had											

Disease

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	7	108	0	NA

LEA: 1608020

School Medical Immunization

County: CRAIGHEAD

Cycle: 3

HEALTH, WELLNESS & ENVIRONMENTAL STUDIES MAGNET 2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	D	E	F	G	н	I	J	К	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	120	118	117	118	117	116	0	NA	NA	115	0	0	0	0
	Had													

Disease 0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	4	115	1	NA

LEA: 1608020

School Medical Immunization

County: CRAIGHEAD

Cycle: 3

HEALTH, WELLNESS & ENVIRONMENTAL STUDIES MAGNET 2024 - 2025

				Sectio	on I - Numb	er of Studen	nts Meeting I	Requiremen	its		Section II - Exemptions				
Α	В	С	D	E	к	L	М	N	0						
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt	
03	97	95	96	96	95	96	0	NA	NA	94	0	0	0	0	
Had Disease											7.				

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	3	94	0	NA

LEA: 1608020

School Medical Immunization

County: CRAIGHEAD

HEALTH, WELLNESS & ENVIRONMENTAL STUDIES MAGNET 2024 - 2025

				Sectio	on I - Numb	er of Studer	nts Meeting I	its		Section II - Exemptions				
Α	В	С	D	E	К	L	М	N	0					
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	97	96	97	97	96	95	0	NA	NA	94	0	1	0	1
Had Disease										-	2			

0

*1 Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	2	95	0	NA

LEA: 1608020

School Medical Immunization

County: CRAIGHEAD

HEALTH, WELLNESS & ENVIRONMENTAL STUDIES MAGNET 2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	D	E	К	L	М	N	0					
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
05	96	90	93	92	94	92	17	NA	NA	87	0	0	0	0
Had Disease										-	a			

0

*1 Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	8	87	1	NA

LEA: 1608020

School Medical Immunization

County: CRAIGHEAD

Cycle: 3

HEALTH, WELLNESS & ENVIRONMENTAL STUDIES MAGNET 2024 - 2025

				Sectio		Section II - Exemptions								
Α	В	С	D	E	К	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	102	101	102	102	100	99	69	NA	NA	67	0	0	0	0
Had Disease														

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	35	67	0	NA

LEA: 1608021

School Medical Immunization

INTERNATIONAL STUDIES MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	D	E	L	М	N	0						
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	103	98	98	99	96	96	NA	NA	99	96	0	1	5	6
		-	2		~	Had Disease						7		

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	0	102	1	NA

LEA: 1608021

School Medical Immunization

INTERNATIONAL STUDIES MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen	ts Meeting	Requirement	ts		Section II - Exemptions			
Α	В	С	D	E	κ	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	103	102	102	102	100	100	0	NA	NA	100	1	0	1	2
	~	-	2	~	~	Had Disease	°					4		

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	1	102	0	NA

LEA: 1608021

School Medical Immunization

INTERNATIONAL STUDIES MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen	ts Meeting	Requiremen	ts		Section II - Exemptions			
Α	В	С	D	E	L	М	N	0						
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	107	101	103	103	104	100	0	NA	NA	98	0	4	0	4
	~	-	2	~	~	Had Disease						4		

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	4	102	1	NA

LEA: 1608021

School Medical Immunization

INTERNATIONAL STUDIES MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen	ts Meeting	Requiremen	ts		Section II - Exemptions			
Α	В	С	D	E	К	L	М	N	0					
Grade	Total Enrolled		IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	101	99	99	98	100	100	0	NA	NA	98	0	0	0	0
	Had Disease											4		

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	2	98	1	NA

LEA: 1608021

School Medical Immunization

INTERNATIONAL STUDIES MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen	ts Meeting	Requirement	ts		Section II - Exemptions			
Α	В	С	D	E	К	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
05	115	112	112	112	113	109	9	NA	NA	98	0	0	1	1
	~	•	2			Had Disease	°				-	4		

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	15	99	1	NA

LEA: 1608021

School Medical Immunization

INTERNATIONAL STUDIES MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	D	E	F	G	н	I	J	к	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	112	111	111	111	111	111	97	NA	NA	97	0	0	2	2
	~	-	2	*	~	Had Disease			·	-	-	7	~	

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	13	99	0	NA

LEA: 1608026

School Medical Immunization

KINDERGARTEN CENTER

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	C D E F G H I J K											0
Grade	Total Enrolled		IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
K	489	462	470	477	470	464	NA	NA	479	453	0	5	4	9
			7	~	~	Had Disease			-			<i>a.</i>	~	

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
К	26	462	1	NA

LEA: 1608022

School Medical Immunization

LEADERSHIP MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen	ts Meeting	Requirement	ts		Section II - Exemptions			
Α	В	С	D	E	К	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	81	79	78	78	76	75	NA	NA	78	74	0	0	0	0
						Had Disease			Ì					

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	5	74	2	NA

LEA: 1608022

School Medical Immunization

LEADERSHIP MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

				Sectio		Section II - Exemptions								
Α	В	С	D	E	к	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	91	90	90	91	90	88	0	NA	NA	87	0	0	1	1
				·		Had Disease	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		·					

0

*1 Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	3	88	0	NA

LEA: 1608022

School Medical Immunization

LEADERSHIP MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	D	E	К	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	95	88	90	92	90	89	0	NA	NA	86	0	0	1	1
		•	-2	~	~	Had Disease			Ç.			7.		

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	8	87	0	NA

LEA: 1608022

School Medical Immunization

LEADERSHIP MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen	ts Meeting	Requirement	ts		Section II - Exemptions			
Α	В	С	D	E	κ	L	М	N	0					
Grade	Total Enrolled	1	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	74	71	73	73	73	73	0	NA	NA	70	0	0	1	1
	~		2	~	~	Had Disease	°				-		~	

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	3	71	0	NA

LEA: 1608022

School Medical Immunization

LEADERSHIP MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	D	E	F	G	Н	I	J	к	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
05	74	70	72	72	72	72	5	NA	NA	61	0	0	0	0
	~	-	2	~	~	Had Disease			·		-	4	~	-

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	11	61	2	NA

LEA: 1608022

School Medical Immunization

LEADERSHIP MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

				Sectio	on I - Numb	er of Studen	ts Meeting	Requirement	ts		Section II - Exemptions			
Α	В	С	D	E	κ	L	М	N	0					
Grade	Total Enrolled	1	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	80	78	79	79	79	78	48	NA	NA	47	0	0	0	0
	Had Disease										-	1		

0

*1 Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	32	47	1	NA

LEA: 1608017

School Medical Immunization

MATH & SCIENCE MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	D	E	к	L	м	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	86	82	82	83	84	83	NA	NA	85	80	0	1	1	2
	v			·	~	Had Disease			·	-				

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	4	82	0	NA

LEA: 1608017

School Medical Immunization

MATH & SCIENCE MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	D	E	К	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	90	90	89	90	90	90	0	NA	NA	89	0	0	0	0
Had Disease										-	4			

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	1	89	0	NA

LEA: 1608017

School Medical Immunization

MATH & SCIENCE MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

				Sectio	on I - Numb	er of Studen	ts Meeting	Section I - Number of Students Meeting Requirements											
Α	В	С	D	E	к	L	М	N	0										
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt					
03	89	87	87	87	87	86	0	NA	NA	86	0	1	0	1					
	Had Disease												~						

0

*1 Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	2	87	0	NA

LEA: 1608017

School Medical Immunization

MATH & SCIENCE MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	n I - Numb	er of Studen	ts Meeting	Section I - Number of Students Meeting Requirements											
Α	В	С	D	E	к	L	М	N	0										
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt					
04	80	80	80	80	80	80	2	NA	NA	80	0	0	0	0					
Had Disease										-	4								

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	0	80	0	NA

LEA: 1608017

School Medical Immunization

MATH & SCIENCE MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen	its Meeting I	Requiremen	ts		Section II - Exemptions				
Α	В	С	D	E	F	G	н	I	J	κ	L	М	N	0	
Grade	Total Enrolled		IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt	
05	73	72	72	72	72	72	13	NA	NA	71	0	1	0	1	
	Had Disease										-	4			

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	1	72	0	NA

LEA: 1608017

School Medical Immunization

MATH & SCIENCE MAGNET SCHOOL

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	D	E	κ	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	80	80	80	79	79	79	78	NA	NA	79	0	0	0	0
		•	2	~		Had Disease						1		

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	1	79	0	NA

LEA: 1608027

School Medical Immunization

Cycle: 3

THE ACADEMIES AT JONESBORO HIGH SCHOOL

2024 - 2025

County: CRAIGHEAD

				Sectio		Section II - Exemptions								
Α	В	С	D	E	F	G	Н	I	J	κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
07	1	1	1	1	1	1	1	1	NA	1	0	0	0	0
			2			Had Disease			~			1	~	

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
07	0	1	0	0

LEA: 1608027

School Medical Immunization

County: CRAIGHEAD

THE AC	THE ACADEMIES AT JONESBORO HIGH SCHOOL 2024 - 2025										County: CRAIGHEAD				
				Sectio		Se	ection II -	Exemp	tions						
Α	В	С	D	E	К	L	М	Ν	0						
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt	
09	10	9	9	9	9	9	9	7	NA	8	0	0	0	0	
	~			~		Had Disease		2 Doses*		-					

0

*MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

0

1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
09	2	8	0	0

LEA: 1608027

School Medical Immunization

County: CRAIGHEAD

Cycle: 3

THE ACADEMIES AT JONESBORO HIGH SCHOOL 2024 - 2025											County: CRAIGHEAD			
				Sectio	on I - Numb	er of Studen	ts Meeting	Requirement	S		Section II - Exemptions			
Α	В	С	D	E	к	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
10	516	502	504	505	508	505	501	345	NA	490	0	2	1	3
		•	2		~	Had Disease		2 Doses*				4.		

19

*MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

1

1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
10	20	493	3	1

LEA: 1608027

School Medical Immunization

County: CRAIGHEAD

THE AC	ADEMIES	AT JONE	SBORO HI	GH SCHO	OL	:	2024 - 2025	5			County: CRAIGHEAD				
				Sectio	on I - Numb	er of Studen	its Meeting	Requirement	S		Section II - Exemptions				
Α	В	С	D	E	к	L	М	N	0						
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt	
11	511	507	507	507	506	503	497	8	NA	494	0	0	5	5	
		•	2	~		Had Disease		2 Doses*				4	~		

104

*MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

1

1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
11	12	499	0	1

LEA: 1608027

School Medical Immunization

County: CRAIGHEAD

THE ACADEMIES AT JONESBORO HIGH SCHOOL2024 - 2025												Cou	nty: CR/	AIGHEAD
				Sectio		Section II - Exemptions								
Α	В	С	D	Е	К	L	М	Ν	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose	MCV4 1 Dose*	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
12	450	440	446	445	446	445	444	7	NA	435	0	1	1	2
				~	~	Had Disease		2 Doses*						

310

*MCV4 - Second dose at age 16 years (as of September 1st each year) with a minimum interval of 8 weeks since 1st dose -OR-

1

1 dose if not vaccinated prior to age 16 years (If first dose is administered at age 16 years or older, no second dose required.)

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 3 Doses
12	11	437	2	0

LEA: 1608019

School Medical Immunization

VISUAL & PERFORMING ARTS MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio		Section II - Exemptions								
Α	В	С	D	E	к	L	М	N	0					
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP N/A	MCV4 N/A	HepA 1 Dose	All Requirements	Code M	Code R	Code P	Total Exempt
01	131	127	126	127	122	122	NA	NA	128	121	0	2	1	3
(<u></u>	Had Disease										-	-7		-

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
01	7	124	0	NA

LEA: 1608019

School Medical Immunization

VISUAL & PERFORMING ARTS MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen		Section II - Exemptions						
Α	В	С	D	E	F	G	Н	I	J	к	L	М	N	0
Grade	Total Enrolled	1	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
02	121	116	117	118	117	117	0	NA	NA	116	0	0	4	4
	~	-	2	~		Had Disease			~			7	~	

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
02	1	120	0	NA

LEA: 1608019

VISUAL & PERFORMING ARTS MAGNET

School Medical Immunization

2024 - 2025

0

County: CRAIGHEAD

				Sectio		Section II - Exemptions								
Α	В	С	D	E	F	G	н	I	J	к	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
03	140	140	140	140	139	139	0	NA	NA	139	0	0	0	0
	~	-	2	Ŷ	~	Had Disease						4	~	

*1 Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
03	1	139	0	NA

LEA: 1608019

School Medical Immunization

VISUAL & PERFORMING ARTS MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen	ts Meeting I	Requiremen	ts		Section II - Exemptions			
Α	В	С	D	E	F	G	н	I	J	κ	L	М	N	0
Grade	Total Enrolled	DTaP 4 Doses	IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
04	112	112	111	112	111	111	0	NA	NA	110	0	0	1	1
	~	•	2	~	~	Had Disease	`				-	4		

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
04	1	111	0	NA

LEA: 1608019

School Medical Immunization

VISUAL & PERFORMING ARTS MAGNET

2024 - 2025

County: CRAIGHEAD

Cycle: 3

				Sectio	on I - Numb	er of Studen	its Meeting I	Requiremen	ts		Section II - Exemptions				
Α	В	С	D	E	F	G	н	I	J	κ	L	М	N	0	
Grade	Total Enrolled		IPV/OPV 3 Doses		MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt	
05	114	113	113	113	112	112	2	NA	NA	101	0	0	0	0	
	Had Disease														

0

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
05	13	101	0	NA

LEA: 1608019

School Medical Immunization

VISUAL & PERFORMING ARTS MAGNET

2024 - 2025

County: CRAIGHEAD

				Sectio		Section II - Exemptions								
Α	В	С	D	E	F	G	н	I	J	к	L	М	N	0
Grade	Total Enrolled		IPV/OPV 3 Doses	HepB 3 Doses	MMR 2 Doses	Varicella 2 Doses	TDAP 1 Dose*	MCV4 N/A	HepA K-1st Only	All Requirements	Code M	Code R	Code P	Total Exempt
06	112	110	110	110	110	110	57	NA	NA	57	0	0	1	1
	·			·		Had Disease	·		ž		-	12		

0

*1 Dose required if student is older than 11 years on September 1st

	Partial Records	Compliant	Non-Compliant	Recommended
	Р	Q	R	S
Grade	Incomplete Records	Total Compliant K + O	No Records	HPV 7-12th Only
06	53	58	1	NA