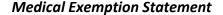
## **Great Falls School District**



Form HES 101A Montana Schools



For questions, contact the Montana Department of Immunizations at (406) 444-5580

A prospective student seeking to enroll in a Montana school is not required to receive any immunizations for which they are medically contraindicated. The Medical Exemption Statement, may be completed by a qualifying healthcare provider and utilized as an exemption. In lieu of this form, a written and signed statement from a qualifying healthcare provider will also be accepted under the conditions outlined in ARM 37.114.715.

Pursuant to HB 334 (Ch. 294, L. 2021), a qualifying healthcare provider means a person who: (1) is licensed, certified, or authorized in any U.S. State or Canada to provide health care; (2) is authorized within the person's scope of practice to administer the immunization(s) to which the exemption applies; and (3) has previously provided health care to the student or has administered a vaccine to which the student has had an adverse reaction. Once completed, this form should be filed at the student's school along with their most current immunization record.

Student Name:		Parent/Guardian Name:		
Student Address:		Student Date of Birth:		
	the vaccine(s) needing medical exemption, the indication orprecaution for each vaccine:	en provid	de a brief description of the	
	DTaP (Diphtheria, Tetanus, and Pertussis)		MMR (Measles, Mumps, and Rubella)	
	Tdap (Diphtheria, Tetanus, and Pertussis)		IPV (Polio)	
	Varicella (Chickenpox)		Other:	
	Hib (Haemophilus influenzae type b)			
Contr	raindication/Precaution:			

A complete list of medical contraindications and precautions can be found on the Centers for Disease Control and Prevention's website: https://www.cdc.gov/vaccines/hcp/aciprecs/general-recs/contraindications.html.

Duration of exemption:			
Provider's Name (print):	Title:	Phone:	
Address:			
Provider's Signature:		Date:	

## **Montana Code Annotated**

Administrative Rules of Montana

20-5-403: MT School Immunization Requirements, Immunization Records Schools20-5-405: MT School Immunization Requirements, Exemptions

4.701-721: Immunization of K-12, Preschool, and Post-Secondary