CERTIFICATION OF RABIES VACCINATIONS

All students must submit this form to the Office for Students and include full documentation if previously vaccinated. All students who have been previously vaccinated must also upload documentation to the Student Health Services Immunization Compliance Office website.

Please Check One:

_____ I have not had my Rabies vaccinations. Please schedule me for my inoculations at Student Health. I agree to pay a total of approximately $1,035.00 (~$345.00 per injection) to the University of Pennsylvania Student Health Services for the three vaccinations to be administered by Student Health Services. If my health insurance carrier provides reimbursement for these services, it is my responsibility to file a claim unless I am covered under the University-sponsored Penn Student Insurance Plan (PSIP), in which case Student Health Services will bill PSIP directly.

_____ I received my rabies vaccinations prior to September 1, 2020.* Attached are:

1) proof of original vaccinations AND
2) current titer result (titer must be drawn between 3/1/21 and 8/24/21)

(You must include proof of both your original vaccinations AND a satisfactory titer)

_____ I received my Rabies vaccinations after September 1, 2020.* Attached is proof of my rabies vaccinations.

*Vaccinations must be administered by a licensed human-health care provider and must include the following documentation: product, dates administered, and name and address of administering office. Your verification of vaccination will not be considered valid without this documentation. The record must be signed and dated by a nurse or physician.

Any student presenting documentation from a wildlife or rehab center is required to present a positive rabies titer regardless of date of original vaccinations. The reason for this is that often pre-exposure rabies vaccinations given at these centers is actually only 1/10 of the recommended dose and considered "off-label." Any necessary booster and required re-titer must be submitted and accepted prior to New Student Orientation.

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Please **print** your Name and current Email Address

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Please **sign** your name