



Student Health Center  
 2083 Lawrenceville Road  
 Lawrenceville, NJ 08648-3099  
 T 609-896-5060 F 609-895-5682  
 www.rider.edu

**Rider University Student Health Services**  
**Student Health Requirement Form**  
**Graduate Students**  
**(Return prior to registration)**

Student ID: \_\_\_\_\_ F/T \_\_\_ P/T \_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

In Case of Emergency:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

*I hereby grant permission to the Health Services personnel to contact the person named above in the event of a medical emergency.*

**\*\*Students age 31 or older do not have to show proof of immunizations. I am over age 31.  Yes  
 Complete top portion only, sign and return to Rider University Student Health Center\*\***

STUDENT'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

*Please provide proof of mandatory vaccinations.*

*If immunization records are attached, the bottom portion of this form does not need to be completed.*

**MMR Vaccine** (Measles, Mumps, Rubella)

Two Vaccines are required

1<sup>st</sup> Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

2<sup>nd</sup> Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

(Must be on or after 1<sup>st</sup> birthday)

OR

Antibody Titers (Attach lab slip if titer is being used to complete this requirement)

**If taking 9 or more credits:**

**Hepatitis B Vaccine**

Three Vaccines are required

1<sup>st</sup> Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

2<sup>nd</sup> Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

3<sup>rd</sup> Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

OR

Antibody Titers (Attach lab slip if titer is being used to complete this requirement)

**Meningitis Vaccine** (Required only if living on campus)

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Provider's Stamp:

Signature of MD/NP/PA: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_