Welcome to St. Bonaventure University!

The staff of the Center for Student Wellness in Doyle Hall welcomes you to St. Bonaventure. We want to make sure you have the best experience possible and that we are able to provide the best CARE possible for you as needed. In order to do so, and to be compliant with NYS law, we need a few things from you.

New York State Public Health Laws 2165 and 2167 requires that you provide us with your complete immunization record. The required immunization information is located on page 2 of this packet. You need to have this information to us by:

- **30 days after the first day of classes for New York residents**;
- **45 days after the first day of classes for out of state and international students**.

*IF YOU HAVE GRADUATED FROM ST. BONAVENTURE WITHIN THE PAST 6 YEARS, YOU DO NOT NEED TO RESUBMIT YOUR IMMUNIZATION RECORDS UNLESS PERSONALLY INSTRUCTED BY THE CENTER FOR STUDENT WELLNESS STAFF. BE ADVISED THAT CERTAIN GRADUATE PROGRAMS MAY REQUIRE ADDITIONAL IMMUNIZATIONS OR HEALTH SCREENINGS. PLEASE CHECK WITH YOUR PROGRAM CHAIR OR THE GRADUATE ADMISSIONS OFFICE.*

Please submit the **COMPLETED** forms to us by:

1. Faxing them to The Center For Student Wellness at **716-375-7892**.
2. Scanning the completed forms and emailing them to us at **cswsbu@sbu.edu**
3. Mailing them to:
   **Center for Student Wellness**
   St. Bonaventure University
   127 Doyle Hall, PO Box 2469
   St. Bonaventure, NY 14778
4. Bringing the completed forms to the Graduate Admissions Office, second floor of Hopkins Hall, or to the Center for Student Wellness, **room 127 in Doyle Hall** at SBU.

**PHOTOS OF YOUR RECORDS USING YOUR CAMERA ARE NOT ACCEPTABLE AND YOU WILL BE ASKED TO RESUBMIT THEM USING ONE OF THE METHODS ABOVE.**

**PLEASE NOTE:** Immunizations may be provided by a medical office, or may be a copy of records you possess that include the name of the clinic or office providing them and bear a copy provider’s original signature. Note that many grad students are able to have their undergraduate college send immunization records. If you were an undergraduate student recently, please try this first as it is often the most convenient way to obtain them.

**ATTENTION VETERANS:** We will temporarily accept proof of honorable discharge if it was issued WITHIN THE PAST 10 YEARS until your actual immunization record from the armed services arrives. If an actual health risk incident occurs on campus while waiting for the actual record to arrive, you may be asked to leave campus until the incident abates or your record arrives.

THANK YOU FOR YOUR PROMPT ATTENTION TO THIS VERY IMPORTANT PART OF YOUR GRADUATE SCHOOL EXPERIENCE! WE WISH YOU WELL ON YOUR JOURNEY. —The Center for Student Wellness Staff
Please return forms to:
St. Bonaventure University
Center for Student Wellness
127 Doyle Hall
PO Box 2469
St. Bonaventure, NY 14778
Phone: 716-375-2310
Fax: 716-375-7892
Email: CSWSBU@SBU.EDU

Please check when you will be
starting and write which year.

_____ Fall Year: ________
_____ Spring
_____ Summer
Other: (please specify)

NAME: Last ______________________________ First ___ Middle______________________

Previous names used (i.e. maiden names, etc):_________________________________________________________

HOME ADDRESS: Street _____________________________________ PO Box: _____________ City: _____________
State/Province:____________________ Zip Code: ______________ Country:______________

PHONE: Home_____________________________ Cell _______________________ EMAIL __________________

EMERGENCY CONTACT: __________________________ (Relationship to student) ____________________

PHONE: Home_________________ Cell ______________ Business ____________________

Permission To Release Medical Information  (For all students 18 and over.)

I hereby grant permission to the Center For Student Wellness, Health Services Unit, to release information to Campus Security, the Vice President of Student Affairs, the SBU Medical Emergency Response Team (MERT), Counseling Services, Residence Life, Club Sports Personnel, Ambulance Personnel, and Olean General Hospital Emergency Department Personnel if needed, in the best interest of my health and safety. I acknowledge this release is only valid in emergency situations where my safety or life is in danger. I understand that any other release of my personal information will require me to sign a third party release through the Center For Student Wellness.

Student signature: __________________________________________Date: MM/DD/YYYY __________________________

INSURANCE INFORMATION  Do you have health insurance? _____ YES _____ NO

Select one: _____ On parent/guardian/spouse policy _____ Individual policy holder _____ Purchased SBU student policy

PLEASE NOTE: Health insurance is required by law for everyone. If you presently are not covered by health insurance and are taking at least 6 credits, you may purchase the SBU student policy. Information for obtaining coverage through the St. Bonaventure Plan is available at:

http://www.sbu.edu/life-at-sbu/services-for-students/health-wellness

*If you are interested in using the campus Center for Student Wellness Health Services, you may do so for a charge of $55 per semester. This amount is not prorated, so if you decide to start using campus Health Services, you will need to pay $55 regardless of when during the semester you decide to pay. This charge only covers campus Health Services. If you opt in to use campus Health Services, there will be additional health information forms for you to fill out. Please contact the Bursar’s office for additional information at 716-375-2030 or the Center for Student Wellness at 716-375-2310. Thank you.
NOTICE: IT’S THE LAW!

These forms need to be completed and returned to the Center for Student Wellness.

New York State Public Health Law 2165 requires college students to show proof of immunity to measles, mumps, and rubella. People born before 1/1/1957 are exempt from this requirement, unless required by their academic major to meet clinical placement requirements. If you are exempt, you must provide proof of age. New York State Public Health Law 2167 requires colleges to distribute information about meningococcal disease and vaccination to all students.

PLEASE PROVIDE A COPY OF APPROVED IMMUNIZATION RECORDS, AS REQUIRED BY NEW YORK STATE.
(Must include student’s name, month, day, and year of all vaccinations.)

1. 2 (two) MMR shots (MEASLES, MUMPS, RUBELLA) as combined vaccinations. IF RECEIVING VACCINATIONS SEPARATELY,
   - Measles: Documentation of two (2) live measles vaccines
   - Mumps: Documentation of at least one (1) live mumps vaccine
   - Rubella: Documentation of at least one (1) live rubella vaccine
   OR
   *A copy of a positive MMR titer result.

2. Meningococcal/Meningitis: PLEASE CHECK THE LINE FOR THE CHOICE YOU ARE PROVIDING.
   a. _______ I received the meningococcal (meningitis) immunization within the past 5 years.
   OR the option below in the box:

   b. _______ I am choosing to NOT RECEIVE the meningitis vaccine at this time. Please read the meningococcal vaccine fact sheet found at: https://www.health.ny.gov/publications/2168/

   “I have read the meningitis information found at the above website or on the St. Bonaventure University Health Services web page, or I have had the information explained to me by a professional health care provider regarding meningococcal disease (meningitis). I understand the risks of NOT having the vaccine. I have decided that I (or my child, for students under the age of 18) will NOT obtain the immunization against meningococcal disease (meningitis) at this time.”

   **SIGNATURE NEEDED ONLY IF YOU ARE REFUSING THE MENINGITIS VACCINATION**

   Signature (Students 18 and over OR parent): ___________________________ Date________________

*MEDICAL/RELIGIOUS EXEMPTIONS from vaccinations require a written statement of explanation signed by a physician for medical exemptions or a written explanation of genuine and sincere beliefs contrary to the practice of immunization for religious exemptions.

*STUDENTS WAIVING VACCINATIONS: Any student waiving vaccinations for any reason will be asked to leave campus (for resident students) or remain off campus (commuter students) if an outbreak occurs until the situation is resolved.

IMPORTANT NOTE: The St. Bonaventure Health Services Unit DOES NOT PROVIDE the meningococcal/meningitis vaccines. If you are planning on getting the vaccine, but have not yet done so, please consult with your physician or your local county health department prior to arrival on campus. You may get the vaccine locally at the Cattaraugus County Dept. of Health at: 1 Leo Moss Drive, #4010, Olean, NY 14760. The approximate costs as of April 2017 of the available vaccines choices are:

Menvio: $113  Men B series (x2): Approx. $165 per dose.