

Student Information

Nebraska Wesleyan University Medical & Health History

Nebraska Wesleyan University's Residential Education staff uses the confidential medical and health history form to manage immunization records and medical emergencies. Questions about this form can be directed to Brandi Sestak, Assistant Dean for Student Success & Residential Education, bsestak@nebrwesleyan.edu.

Printed First & Last Name:		
Birthdate:	Email Address:	
Permanent Address:		
Cell Phone:		
Emergency Contact		
Authorities at Nebraska Wesleyan University make every effort to contact a resident's provided contact person in the event of an emergency. Please provide us with your emergency contact information.		
Printed Name:		
	Primary Phone:	

Immunizations

To ensure the health and safety of the NWU community with respect to communicable diseases, residents are required to document that they have had the following vaccines:

- Two MMR (Measles, Mumps, Rubella) vaccines
- At least one Meningitis vaccination at or above age 16
- Completed COVID-19 vaccination

A completed COVID-19 vaccination is defined as a single dose of the Janssen (Johnson & Johnson) vaccine or two doses of either the Pfizer or Moderna vaccine. Booster doses are *recommended* for those who are eligible. Residents with medical or religious reasons requesting exemption from this policy must submit the Student Vaccination Exemption Request form for approval. Residents may request this form by contacting the NWU Student Life Office at studentlife@nebrwesleyan.edu.

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Southeast Community College residents must submit their required immunization documents before or at move-in, or their housing may be refused. **Copies of the required vaccination records must be attached to this form.**

Physical & Medical Health History

Please share allergic reactions, medical comedical history that may be important for the event of a medical emergency.	onditions, current medications & pertinent Residential Education staff to know about in
Confirmation Signature	
I agree that all the preceding information is knowledge. I understand that if I have frau	l and understand the information on this form s answered accurately and to the best of my idulently misrepresented information m legally responsible and may be subject to
Signature:	Date:

This form may be turned in at the time of student move-in or mailed to NWU Residential Education, 5000 St. Paul Ave., Lincoln, NE 68504.