



Certificate of Immunization Status (Kein kamool ke emōj am wā)

Jouj im būrin. Lale liik ūn kōmmelele ko kin wāwein kanne pepa in akselak bwe en būrin jān Washington State Immunization Information System (System in Kōmmelele kin Wā).

Reviewed by: _____ Date: _____
Signed COE on File? Yes No

Et eo etan Baamle eo an Ajiri eo:		Etan :		Injal eo iołap :		Raanin Iotak (Allōñ/Raan/Yiiō):	
Ij lelak aō melim ūn jikuul eo an ajiri eo/jikin lale ajiri ūn lelak kōmmelele kin wā ūn Immunization Information System (System in Kōmmelele kin Wā) ūn jibāñ lale rekoot eo an ajiri eo nejū.				Wāwein eo wōt: Ij kile ke ajiri eo nejū ej deļoñ ilo jikuul/jikin lale ajiri ūn. ūn an ajiri eo nejū pād wōt ilo jikuul, ij aikuj in lelak pepa in wā ilo raan ko emōj karōk in lelak. Lale liik ūn tōl ko kin wāwein in.			
X				X			
Jain in etan Jinen ak Jemen/Rikejbarok Raan		Raan		Jain in etan Jinen ak Jemen/Rikejbarok Raan aikuj ūn ej jino ilo wāwein eo		Raan	
Wā ko ej Aikuj ūn Deļoñ ilo Jikuul eo Lale Ajiri							
▲ Aikuj ūn Jikuul • Aikuj Lale Ajiri/Kilāāj eo jinion		ALLŌÑ/RAAN/YIIÖ	ALLŌÑ/RAAN/YIIÖ	ALLŌÑ/RAAN/YIIÖ	ALLŌÑ/RAAN/YIIÖ	ALLŌÑ/RAAN/YIIÖ	ALLŌÑ/RAAN/YIIÖ
•▲ DTaP (Nañinmej in Diphtheria, Tetanus, Pertussis)							
▲ Tdap (Nañinmej in Tetanus, Diphtheria, Pertussis) (kilāāj 7+)							
•▲ DT ak Td (Nañinmej in Tetanus, Diphtheria)							
•▲ Hepatitis B							
• Hib (Nañinmej in Haemophilus influenzae type b)							
•▲ IPV (Nañinmej in Polio) (Jabdewōt koba in IPV/OPV)							
•▲ OPV (Nañinmej in Polio)							
•▲ MMR (Nañinmej in Measle, Mump, im Rubella)							
• PCV (Nañinmej in Pnuemococcal)							
•▲ Varicella (Nañinmej in Chickenpox) <input type="checkbox"/> Jān etto ūn raan kein kin nañinmej eo emōj kamol jān IIS							
Wā eo Emōj Rōjañ Kake (Ejjab aikuj ūn Deļoñ ilo Jikuul eo Lale Ajiri)							
COVID-19							
Mej in (Nañinmej in Influenza)							
Hepatitis A							
HPV (Nañinmej in baerōj an Armij)							
MCV/MPSV (Nañinmej in Meningococcal kain A, C, W, Y)							
MenB (Nañinmej in Meningococcal kain B)							
Rotavirus							
I certify that the information provided on this form is correct and verifiable.		Health Care Provider or School Official Name: _____ Signature: _____ Date: _____ If verified by school or child care staff the medical immunization records must be attached to this document.					

Kōmmelele ko ñan kamōj e Certificate of Immunization Status (CIS): Būriñ jān Immunization Information System (IIS) ak kanne kin peim.

Ñan būrin kōmmelele ko kin wā:

Kajitōk ippān opij eo an jikin taktō eo am ilo WĀ Immunization Information System (IIS, System eo ikijen Melele in Wā) (jikin delōñ ilo aelōñ eo an Washington). Ñe renij, kajitōk bwe ren būrin Certificate of Immunization Status (CIS, Pepa in Kamol ikijen Wā) jān IIS im melele ko kin wā an ajiri eo nejim enij kajju kanne. Kwōj māroñ in bar būriñ ilo CIS ilo mweo mōm ilo am delōñ im etal ña MyIR ilo <https://myirmobile.com/>. Ñe jikin taktō eo am ejjab kōjerbale IIS, email ak kūrlök Department of Health (Rā eo an Ejmour) ñan bōke juon kape in ajiri eo nejim CIS: waiisrecords@doh.wa.gov ak 1-866-397-0337.

Kanne pepa eo kein peim:

1. Būriñ etan ajiri eo nejim im raanin lōtak, im Jain etam ijo emōj kwalok ilo peij juon.
2. Likit raan eo kajojo wā ekar bōke ilo jikin raan eo (āinwōt Allōñ/Raan/Yiiō). Ñe ajiro eo nejim enij bōke juon wā ej kōba (juon wā ej bobrae jān eloñ nañinmej), kōjerbale Wawen Tōl ko ilal ñan rekoot kajojo wā ilo an jimwe. Ilo waanjoñak, rekoot Pediarix iumin Diphtheria, Tetanus, Pertussis āinwōt DtaP, Hepatitis B āinwōt Hep B, im Polio āinwōt IPV.
3. Ñe ajiro eo nejim ewōr an nañinmej in chickenpox (varicella) im ejjab wā eo, juon jikin taktō ej aikuj in kamol nañinmej in chickenpox eo ñan tōbar aikuj ko an jikuul eo.
 - Ñe jikin taktō eo am emāroñ in kamol ke ajiri eo nejim ej nañinmej in chickenpox, kajitōk ippān jikin taktō eo am bwe en lale bōqk eo ilo Documentation of Disease Immunity (Pepa in Kamol Nañinmej) im Jain i pepa in.
 - Ñe ríjerbal in jikuul eo renij kapellök IIS im lale kamol ke ajiri eo nejim ewōr an nañinmej in chickenpox, renij lale iumin Varicella ilo jikin wā eo.
4. Ñe ajiro eo nejim emāroñ in kwalōk an alikkar in teej in bōtōktōk (titer), lale ippān jikin taktō eo am bwe en lale bōqk ko ñan nañinmej eo ejimwe ilo Documentation of Disease Immunity eo, im Jain im likit raan eo ilo pepa eo. Kwōj aikuj in lelak riboot in lab ippān CIS.
5. Kwalōk kein kamol in rekoot in taktō, ilo am loore wāwein tōl kein ilal.

Rekoot in Taktō ko Rej Eman

Aolep rekoot in wā rej aikuj in kamol. Waanjoñak ko rej kōba ippān:

- Juon Certificate of Immunization Status (CIS) emōj an būriñ ippēn raan in wā ko jen Washington State Immunization Information System (IIS), MyIR, ak an juon bar state IIS.
- Juon pepa emōj kanne CIS ippān juon jikin taktō im emōj an Jain.
- Juon pepa emōj kanne CIS ippān rekoot in wā ko emōj aer būriñ juon jikin taktō rekoot in ejmour ippān juon jikin taktō ak stamp. Ej bōk eddo in jikuul eo, nurse, armij eo ej karōk, ej aikuj in kamol raan ko ilo CIS emōj aer kamol im jeiki im lelak Jain ilo pepa eo.

Wāwein eo wōt

Ajiri ro rej māroñ in delōñ im pād wōt ilo jikuul ak jikin lale ajiri ilo wāwein eo wōt ñe rej bōke wā ko rej aikuj ñan jikuul ak jikin lale ajiri. (Wā ko rej ajeedeed ilo jirik wōt jikin, innem jōt ajiri rej aikuj in kōttar jirik ien mokta jān an dedelak wā ko aer. Ej melelein remāroñ in delōñ ilo jikuul eo ilo aer kōttar ñan wā eo juon rej aikuj wōt). Ñan delōñ ilo jikuul ak jikin lale ajiri ilo wāwein eo wōt, juon ajiri ej aikuj wōr aolepen wā ko bwe ren māroñ in tōprak ñan bōke mokta jān an jino jikuul ak jikin lale ajiri.

Rijikuul ro ilo wāwein eo wōt remāroñ in pād ilo jikuul ilo aer kōttar raan eo diktata an wā eo juon kōba ippān bar 30 raan ien ñan lelak pepa in wā. Ñe juon jikuul ej kajeon tōprak ilo eloñ wā, wāwein eo wōt ej wanmaanlıqk ilo juon kol eo im aolep wā ko rej dedelak.

Ñe 30-raan ien ej ejemlök im ejelök pepa emōj an etal ñan jikuul eo ak jikin lale ajiri eo, innem rijikuul eo ej aikuj in jenolök jān an bar pād, jān Revised Code of Washington (RCW, Code eo an Washington emōj Kakāäl e) 28A.210.120. Pepa eo ejimwe ej kōba ippān kamol in māroñ in bobrae jān nañinmej eo ilo kajitōk, rekoot in wā ko rej kwalōk wā, ak juon certificate of exemption (COE, pepa in kamol an jenolök) ie.

Ñan kajitōk bwe ren lewōj peba in ilo bar juon wāwein, kwōn kallqök 1-800-525-0127. Armej ro rej jarroñroñ ren kallqök 711 (Washington Relay) ak email doh.information@doh.wa.gov.