

**Washington State Immunization Information System (IIS)  
School Module Information Sharing Agreement Cover Sheet**

**Enclosed is the Information Sharing Agreement for:**

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Full name of school district, private school, or early learning program

**Please indicate your school/site type:**

- School
- Child Care
- Head Start
- ECEAP

**Please indicate your school/early learning classification:**

- Public
- Charter
- Private
- Not Applicable

**Please indicate what your current level of IIS access is (Check one):**

- View Access – currently have access to view immunization administration dates and print a Certificate of Immunization Status (CIS)
- School Module Access – currently have access to the School Module but need to renew my ISA
- Do not have any current access to the IIS

**Mail the original, signed copy to:**

Washington State Department of Health  
Office of Immunization and Child Profile  
ATTN: ISA Review  
PO Box 47843  
Olympia, WA 98504-7905