

# Application for Immunisation Record



- The Council's Health Department can provide immunisation records for individuals that have been immunised through a Council immunisation service.
- The Council is not able to provide records of immunisations given by doctors or other providers.
- For children under the age of 7 years, immunisation records are available by contacting the Australian Childhood Immunisation Register (ACIR) on 1800 653 809 or visiting their website: [www.humanservices.gov.au/health-professionals/services/australian-childhood-immunisation-register](http://www.humanservices.gov.au/health-professionals/services/australian-childhood-immunisation-register)

## **IMMUNISATION RECORDS REQUIRED FOR:**

**SURNAME:** \_\_\_\_\_

**FIRST NAME:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_ **POSTCODE:** \_\_\_\_\_

**PHONE NO.:** \_\_\_\_\_ **MOBILE:** \_\_\_\_\_

Please list any changes that may have occurred to Surname or First Name that will assist with our search:

\_\_\_\_\_

## **PERSON APPLYING FOR RECORDS:** If the same, write *AS ABOVE*

**SURNAME:** \_\_\_\_\_

**FIRST NAME:** \_\_\_\_\_

**POSTAL ADDRESS:** \_\_\_\_\_

\_\_\_\_\_ **POSTCODE:** \_\_\_\_\_

**PHONE NO.:** \_\_\_\_\_ **MOBILE:** \_\_\_\_\_

**APPLICANT'S RELATIONSHIP TO THE ABOVE MENTIONED (Parent / Guardian):** \_\_\_\_\_

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**OFFICE USE ONLY: E3475**