

Application for immunisation records

The Council's Community Wellbeing Department can provide immunisation records for individuals who have been immunised through a Loddon Shire 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 fourteen (14) years, immunisation records are available by contacting the Australian Childhood Immunisation Register (ACIR) on:

Phone: 1800 653 809

Email: acir@humanservices.gov.au

Web: http://www.humanservices.gov.au/customer/services/medicare/australian-childhood-immunisation-

register?utm source=medicare&utm medium=error-page&utm campaign=transformation

Immunisation record required for			
Surname:			
Please list surname at the time of immunisation or any changes that may have occurred to your surname or first name that will assist with our search.			
First name:	Date of birth:		
Address:			
Phone number (BH):	Mobile:		
Email address:			
Further information to assist in locating your immunisation record			
Do you have your baby immunisation book? • Yes • No			
If Yes, to assist with our search, please attach a copy of all your immunisation records from the back of the book.			
Primary & Secondary Schools attended	Years attended		
1.			
2.			
3.			
Develop applying for ve coud			
Person applying for record			
☐ It is my own records I am applying for (personal details specified above)			
☐ I am applying for another individuals records (please complete personal details below)			



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Surname:		First name:		
Postal address:				
Phone num	ber (BH):	Mobile:		
Email addre	SS:			
Applicant's relationship to the above mentioned:				
Parent	• Guardian Other (p	lease specify):		
Applicants	signature			
Signature:		Date:		
(If immunisation records are required for a person over the age of 18 years, they must sign here).				
Retrieval of	f records			
they will be	posted or emailed to the applicant. rmation regarding immunisation please		eval of records. Once records are retrieved, ommunity Wellbeing Department on	
Please lodge this completed application by using one of the following options:				
Mail:	Loddon Shire Council Community Wellbeing Department PO Box 62 SERPENTINE VIC 3517	In person at Council Offices:	Wedderburn: 37-41 High Street Serpentine: 37 Peppercorn Way	
Fax:	03 5437 8407	Email:	<u>earlyyears@loddon.vic.gov.au</u>	
Office Use (Only			
Date applica	ation received:			
Date immur	nisation record sent:			
Signed Early	Years Coordinator:			
Signed Imm Nurse/Admi				
Loddon Shire (Council	Privacy statement		
	High Street, Wedderburn, Victoria Personal information collected by Council is held securely and		n collected by Council is held securely and used	

Loddon Shire Council 41 High Street, Wedderburn, Victoria P.O. Box 21, Wedderburn, Vic 3518 Telephone: (03) 5494 1200 Facsimile: (03) 5494 3003

Email: <u>loddon@loddon.vic.gov.au</u>
Web: www.loddon.vic.gov.au

Personal information collected by Council is held securely and used solely for municipal purposes as specified in the *Local Government Act 1989*. Council may disclose this information to other organisations if required or permitted by legislation. Should you wish to access or modify this information, please contact Council on (03) 5494 1200 or email loddon@loddon.vic.gov.au