



SOUTH PLAINS COLLEGE
Admissions and Records Office
1401 S. College Avenue, Levelland, TX 79336
Phone: (806) 894-9611, ext. 2574
Fax: (806) 897-3167

BACTERIAL MENINGITIS VACCINATION RECORD REQUEST

Current and former students may request a one-time courtesy copy of their Bacterial Meningitis Vaccination record by completing and submitting this form along with a copy of their SPC ID or a state-issued ID. Your record can be picked up or emailed to your SPC email account or the email used to submit this form. Record will not be faxed, mailed, or emailed to any other college/university or email address.

PLEASE NOTE: If you attended SPC prior to the 2012 Spring Semester, the Admissions and Records Office will not have documentation on file, since it was not an admission requirement until the 2012 Spring Semester.

Type or print in black ink.

Student ID: _____ Date of Birth: _____

Name as it appears on your SPC Record: _____
Last First M

Semester and Year of entry to SPC: _____

Phone Number: _____ Email Address: _____

Please select **ONLY** one.
(Must present or send
SPC ID or a state-issued
photo ID)

Take now.

Email. If you are a current student, your record will be emailed to your SPC email account. If you are a former student, your record will be sent to the email address used to submit this form and ID.

I do hereby authorize the release of my Bacterial Meningitis Vaccination Record from the South Plains College Admissions and Records Office as indicated above. I understand and accept that this is a one-time only courtesy copy.

Student Signature: _____ **Date:** _____

Attach copy of
ID here