

## Renfrew County and District Health Unit Out of Province COVID-19 Dose Documentation Form

## **Instructions:**

Complete this form with as much information as possible and return it to the RCDHU via:

- Email at <u>immunization@rcdhu.com</u>
- Fax to 613-735-3067
- In person to 141 Lake Street, Pembroke or 450 O'Brien Road, Renfrew

You must include a clear picture of your out-of-province vaccination receipt(s) showing:

- Your full name
- Date and location of the vaccination
- Name and lot number of the vaccine
- If applicable, the enhanced vaccine certificate (with QR code) from another province or territory

If you are providing a form for more than one person, use a separate form for each person. If sending by email, send the documents with a separate emails per person.

CLIENT INFORMATION - (red fields are mandatory)					
Ontario Health Card *	First Name	Last Name	Date of Birth	Gender	
			YYYY/MM/DD		
Phone #	Email address	Current address (Str	Current address (Street, city, province, postal code)		
* If you do not have an Ontario health card, provide a picture of an alternate form of identification (driver's licence, birth certificate or passport) so that we can confirm your identity. If your address on your health card or alternate form of identification is not up to date, also provide proof of your current address.					
VACCINE INFORMATION					
Which dose(s) are you submitt		Where was the vaccination(s) given? (Canadian city/province or other country)			
$\Box$ Dose 1 $\Box$ Dose 2 $\Box$ De	(Canadian city/pr				
□ I have no receipt to submit					
Do you know if you already have a file in the provincial database for Ontario (COVax)?					
□ Yes □ No Who first created your file?					
Are you currently scheduled for, or planning to attend, a future vaccination clinic?					
🗆 No					
□ Yes - Date:	Dose #:	Location:			
Additional Information					
<ul> <li>If your name on the vaccination receipts does not match your proof of identification (health card or other identification), please also provide proof of your current legal name and/or name change.</li> <li>If you need assistance, call the RCDHU at 613-732-9436 or 1-833-773-0004.</li> <li>If you do not provide all of the required information, it may take longer for your enhanced vaccine certificate (with QR code) to be available for download.</li> <li>Once completed, your certificate will be available here: <a href="https://covid19.ontariohealth.ca/">https://covid19.ontariohealth.ca/</a>.</li> </ul>					

Personal information contained on this form is collected under the authority of one or more of the following (as amended): the Health Protection and Promotion Act, R.S.O. 1990; the Immunization of School Pupils Act, R.S.O. 1990; the Regulated Health Professions Act, 1991, S.O. 1991; and is in compliance with the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990 and the Personal Health Information Protection Act, 2004, S.O. 2004. This information is used to ensure that all appropriate personal care and public health services are provided, and that necessary statistics are kept. Questions about this collection should be directed to the Program Manager at the Renfrew County and District Health Unit, at 141 Lake Street, Pembroke ON K8A 5L8 1-613-732-3629.