

Enclosed is a packet of information related to the Moderna Vaccine. Please review all the information carefully. **If you have questions about whether you should receive the vaccine , please contact your healthcare provider.**

The following documents are included:

- **COVID-19 Prescreening Eligibility Form for the Moderna Vaccine**
- **DBHDS COVID-19 Vaccine Consent Form for the Moderna Vaccine**
- V-safe After Vaccination Health Checker
- Fact Sheet for Recipients and Caregivers for Moderna Vaccine
- CDC What to Expect after Getting a COVID-19 Vaccine
- **DBHDS/SEVTC Notice of Privacy Practices**

The Eligibility form, Consent form, Notice of Privacy Practices, and this form must be completed and turned in at the time of vaccination.

I have received all the above listed information and had my questions answered. I have had the opportunity to speak with my personal healthcare provider if I have questions about receiving the vaccine.

Print Name

Work Area

Date

Employee Signature: _____