

COVID-19 Vaccine Recipient Checklist



INSTRUCTIONS: Please print this form out and complete **Section 1** before your appointment.
IMPORTANT: You need to bring this form **AND** your completed COVID-19 Vaccine Screening & Consent Form with you to your scheduled appointment.

SECTION 1)

I (*the vaccine recipient*) confirm that I have received and reviewed the following items:

- COVID-19 Vaccine Screening and Consent Form
- What to Expect During and After Your Injection
- Fact Sheet for Recipients and Caregivers
- Notice of Privacy Practices
- V-Safe After Vaccination Health Checker

I (*the vaccine recipient*) confirm that I do not have any known allergies to the following ingredients in the MODERNA vaccine:

- Polyethylene glycol
- [DMG]
- Phosphocholine
- Tromethamine
- Tromethamine hydrochloride
- Acetic acid
- Sodium acetate
- Sucrose

SECTION 2)

I (*the vaccine recipient*) confirm that I have received the following items at my appointment:

- COVID-19 Vaccination Record Card
- Evaluation by medically trained vaccination site staff

Vaccine Recipient's Name

Vaccine Recipient's Signature

Date