



Acceptable Proof of COVID Vaccination

SASKATCHEWAN RESIDENTS

Ministry of Health/SHA Card



RECORD OF COVID-19 IMMUNIZATION

Name: _____

Immunization Date: _____ YY/MM/DD

Date for 2nd Dose: _____ YY/MM/DD



Vaccine Manufacturer: _____

HCW: Please report your immunization to OH&S.

Wallet-Size Card

MySaskHealthRecord

Letter Size 8.5 X 11



COVID-19 VACCINATION RECORD

Province of Saskatchewan, CANADA

Patient

Full Name : Lastname, Firstname Date : 29-Jul-2021 02:33 PM
Date of Birth : 12-May-2001
Age : 20yrs
HSN : 202020202

Vaccinations

Vaccination Date	Vaccine	Location	Source	Lot #
26-Jun-2021	COVID-19 Pfizer-BioNTech mRNA BNT162b2 - COVID-19 mRNA	Regina - Evraz Hall C (Drive-Thru)	Government of Saskatchewan	3002542
24-Jul-2021	COVID-19 Pfizer-BioNTech mRNA BNT162b2 - COVID-19 mRNA	Regina - Evraz Hall C (Drive-Thru)	Government of Saskatchewan	3003746

PLEASE NOTE:

This document contains COVID-19 immunizations as recorded in the Saskatchewan immunization registry. It reflects only vaccine information entered into the registry at the time the report was printed, and may not represent all vaccines received by the individual.

PERSONAL HEALTH INFORMATION IS CONFIDENTIAL