### **COVID-19 Vaccination and Exemption eForm**

The COVID-19 Vaccination eForm is designed for students to submit their COVID-19 immunization record or request a legal exemption (currently, students may only request a medical or religious exemption).

### How to Navigate to COVID-19 Vaccination eForm

1. Log into <u>MyPalomar</u>

Canvas (MyPalomar Faculty/Staff Library Coverning Board Agenda ) Coverning Board Agenda Cov
Find the latest Coronavirus (COVID-19) information
Map your Future
PALOMARPOWERED Future
APPLY ENROLL FIND OPEN CLASSES VIEW SCHEDULE
CONTACT STUDENT SERVICES

2. Read the "Student Health Acknowledgement Face-to-Face Course" and click the "Acknowledged" checkbox at the bottom

Favorites ▼ Main Menu ▼ > Manage GT eForms™ 3.x ▼ > Form Setup > Student Center	🏫 Home 🔰 Sign Out
PALOMAR COLLEGE Long to taxis NOTICE Welcome Student Center	
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Student Health Acknowledgement Face-to-Face Course	
In alignment with the California Division of Occupational Safety and Health (Cal/OSHA) issued guidance on June 17, 2021, and subsequent guidance from additional state and regional public health agencies, Palomar College has instituted every precaution required to ensure the health and safety of all students, faculty, and staff.	
By registering and attending face-to-face courses at Palomar College, you have agreed to:	
<ul> <li>stay home if you are ill; leave campus if you start to feel ill</li> <li>self-screen for health symptoms using the My Palomar app.</li> <li>whenever you are indoors on campus, wear <u>a mask that covers your nose</u> <u>and mouth</u> to help protect yourself and others.</li> <li>respect the requests of others to stay up to 6 feet away.</li> </ul>	
<ul> <li><u>Wash your hands often</u> with soap and water. Use hand sanitizer if soap and water aren't available.</li> </ul>	
<ul> <li>report any illness to your instructor, and complete and submit the COVID- 19 questionnaire available at https://www2.palomar.edu/pages/covid19/covid-19-questionpaire/</li> </ul>	
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NOTICE   <u>Welcome</u>   <u>Student Center</u>	
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3. Click on the "Student Center" tab

Favorites ▼ Main Menu ▼ >> Manage GT eForms ™ 3.x ▼ >> Form Setup >> Student Center	🟫 Home 🔰 Sign Out
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Student Health Acknowledgement Face-to-Face Course	
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By registering and attending face-to-face courses at Palomar College, you have agreed to:	
<ul> <li>stay home if you are ill; leave campus if you start to feel ill</li> <li>self-screen for health symptoms using the My Palomar app.</li> <li>whenever you are indoors on campus, wear <u>a mask that covers your nose</u> <u>and mouth</u> to help protect yourself and others.</li> <li>respect the requests of others to stay up to 6 feet away.</li> <li><u>Wash your hands often</u> with soap and water. Use hand sanitizer if soap and</li> </ul>	
<ul> <li>water aren't available.</li> <li>report any illness to your instructor, and complete and submit the COVID- 19 questionnaire available at <u>https://www2.palomar.edu/pages/covid19/covid-19-questionnaire/</u>.</li> </ul>	
Acknowledged	
NOTICE   <u>Welcome</u>   <u>Student Center</u>	

- 4. Complete The Palomar Placement
  - a. You may be asked to complete The Palomar Placement survey, if you have not done so before or if this is your first time logging into MyPalomar.
  - b. In order to navigate to your Student Center, please complete The Palomar Placement by clicking the "Click here to start" button.



- 5. Click the "COVID Vaccination & Exemption" link at the upper, right-hand corner of your Student Center.
  - a. This will take you into the COVID-19 Vaccination eForm.

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				Records
other academic 🗸 🗸	] (>>)			Official Transcript Admissions Forms Graduation Information Application for Graduation Evolutions and Peocede Office
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• Wy Finances and Financial P	ssistance			
ly Account	Acc	ount Summary		Financial Aid Links
ecount Inquiny		You owe 0.00.	0.00	Have a question? Contact Us:
ctivity Cards (IDs)		<ul> <li>Future Due</li> </ul>	0.00	Direct Loan Exit Counseling
urchase Parking Permit		This may not reflect rec	ent changes to your tuition	
Inancial Ald		Inquiry.	ed balance, Click on Account	Student Finance Links
atisfactory Academic Progress 'iew Financial Aid .pply for CCPG (formerly BOGW)		Currency used is US Do	ollar	Fee/Refund Information Parking Permit Information Email the Cashier's Office
pp., ic. cor o (ionicity bootty)	Mak	e A Payment		Linai die Gashiers Olice
		next Diam Link		

6. You should now be in the COVID-19 Vaccination eForm and may begin filling it out.

Sub	mit COVID-19 Immunization:Vaccination Status	Form ID 102552
Notice to Students		
Palomar College is committed t approved a revised Board Polic its <u>COVID-19 Student Vaccina</u>	to the safety and well-being of all students and employees. On July 6th, 2021, the cy/Administrative Procedure 5210 (Communicable Disease: Students) which allow ation and Immunization Plan for students.	Palomar College Governing Board vs the college to implement
In order to take face-to-face cla vaccination to the college or red fulfill this requirement or who m	asses or to be on campus for an extended time (longer than 15 minutes indoors), ceive approval of a qualifying medical or religious exemption. Online instruction is hay not be able to attend face-to-face classes for other reasons.	students must submit their proof of available for students who do not
Authorization and Disclosure	;	
Pursuant to California's Confide information as described in this described in this authorization.	entiality of Medical Information Act, I authorize the Palomar Community College E authorization. I also authorize representatives from the District to use the medica	District to receive my medical al information for the purposes
This authorization is limited to the	the following types of information:	
Confirmation of COVID-19 (SAI	RS-CoV-2) Vaccination.	
The recipients of this informatio	on may use the information for the following purpose:	
Compliance with the District's C	COVID-19 Vaccination and Immunization Plan for Students.	
Expiration Date: The District is	no longer authorized to disclose or use medical information described in this auth	norization after June 30, 2022.
Right to Receive Copy of this A authorization. Upon request, the	uthorization: I understand that if I acknowledge this authorization, I have the right e District will provide me with a copy of this authorization.	t to receive a copy of this

### How to Submit COVID-19 Immunization Record

- 1. Navigate to the COVID-19 Vaccination eForm
  - a. Follow the previous steps in "How to Navigate to COVID-19 Vaccination eForm"
- 2. Read the "Notice to Students" and "Authorization and Disclosure".
  - a. These sections explain the reasons for requiring this form and how the information in this form will be used.
  - b. It is important that you understand this information as you will be asked to authorize the use and disclosure of the information you provide in the form.
- 3. Scroll down to the Student Information section
  - a. Your student ID number, name, date of birth, and Palomar student email address should appear automatically.
- 4. Update your phone number, if needed
  - a. You may only edit your phone number in this section.
- 5. Scroll down to the COVID-19 Vaccination Information section



- 6. Click on the drop-down box and select "Yes".
  - a. Once selected,

COVID-19 Vac	cination Information	
Read through and comp form from you before the in online classes will not	lete each section of this form as prompted. Please note, if you do not agree to these terms or if we do not receive this e first day of classes, you will not be allowed to attend in-person and could be dropped from all such classes. Enrollment be affected.	
*Have you been vaccinated for COVID-19?	No Yes	

7. The "Immunization" code and "Date of Final Dose" should now appear.

Read throu form from y in online cla	gh and complete you before the firs asses will not be	each section of this t day of classes, yo affected.	form as prompted. u will not be allowed	Please note, if you do n d to attend in-person and	ot agree to these terms I could be dropped fror	or if we do not receive this n all such classes. Enrollmer
*Have vace (	e you been cinated for COVID-19?	6	~			
Imr *Date of I	nunization COV	۲D				
*Date of	Final Dose					

Doad through and com	nate each eaction of this form as promoted. Please note, if you do not eared to these terms or if we do not receive this
form from you before th	ie first day of classes, you will not be allowed to attend in-person and could be dropped from all such classes. Enrollmer
in online classes will no	ot be affected.
*Have you been	
vaccinated for	Yes 🗸
COAID-183	
Immunization	COVD

- 9. Select the date of when you received your final dose of the COVID-19 vaccination.
  - a. Note: in order for your form to be approved, you must have received your final dose of the COVID-19 vaccination; this information must be included in your CDC card at the time you submit the form.
    - Depending on which COVID-19 vaccination you received, you may have had up to two doses of the vaccination. This information should be reflected on your CDC card which you should have received at the time of your vaccination appointment.
  - b. If your vaccination requires two doses and you have not received the second dose yet, you may save your form (see "How to Save eForm") and finish submitting it at a later time.

			-	-			~	Â
	Aug	ıst	C	aieno	2021		~	
COVID-19 Vaccination Informa	S	M	т	w	Т	F	S	
Deed through and appendix and another of this form	1	2	3	4	5	6	7	to these terms or if we do not reasily this
form from you before the first day of classes, you will	8	9	10	11	12	13	14	e dropped from all such classes. Enrollment
In online classes will not be affected.	15	16	17	18	19	20	21	
*Have you been	22	23	24	25	26	27	28	
Vaccinated for Yes  COVID-19?	29	30	31			5		
Immunization COVD								
*Date of Final Dose	۲		Cu	rrent	Date		۲	

- 10. Scroll down to the File Attachments section.
  - a. Here, you will need to upload a copy of your COVID-19 Vaccination card (aka CDC card) to the form.
    - i. You should have received this at the time of your vaccination appointment.
    - ii. If you have not received a COVID-19 Vaccination Card or would like to request another copy, please contact your healthcare provider.
    - iii. If you are unable to upload a copy of your vaccination card at this time, you may save your form (see "How to Save eForm") and finish submitting it at a later time.
  - b. In order to attach the document to the form, the document must be stored on the device that you are using to complete the form.
    - i. For additional help with how to save a copy of the document to your device, please proceed to step 11. Otherwise, you may skip to step 12.

Fi	e Attachments				
In o	rder to submit this form, all appropria	ate documentation r	must be attached. Please ensure that	he attachment is clear and	l legible.
					-
					1 row
	Attachment Required	Action	Description $\Diamond$	File Name 🗘	1 row Delete

11. If you have not done so already, save a copy of your COVID-19 Vaccination card to the device you are using to complete the form. (Note: make sure the copy is clear and legible before attaching)

- a. If you are using a computer to complete the form, the document should be scanned and saved to the computer. If you do not have access to a scanner, you may use a mobile device with a camera (e.g. phone, tablet, etc.) to take a picture of the document. Upload the photo to a cloud platform (OneDrive, Google Drive, iCloud Drive, Samsung Cloud, etc.) or somewhere where you can access it over the internet (e.g. email it to yourself). Use a computer to download the photo and save it to the computer.
- b. If you are using a mobile device that has a camera to complete the form, you may take a picture of the document, save it to the mobile device, and upload it straight to the form.
- 12. Click the "Upload" button.

File Attachments				
In order to submit this form, all appr	ropriate documentation r	must be attached. Please ensure that	the attachment is clear and	l legible.
				1 row
Attachment Required	Action	Description $\Diamond$	File Name 🛇	1 row Delete

13. Click "My Device".

File Attachment	×
Choose From	
My Device	

- 14. Browse your device and go to where you saved the copy of your COVID-19 Vaccination card.
- 15. Select the file.
- 16. Click "Upload"

File Attachment	×
Choose From	
My Device	
Upload Clear	
My CDC Card.jpg File Size: 18KB	

17. Once upload is complete, click "Done".

	File Attachment	Done
Choose From		
My Device		
My CDC Card.jpg File Size: 18KB		
		Upload Complete

18. Scroll down to Action Items section.

ŀ	tion Items		
		1 row	
	Acknowledgement		
	No I authorize the disclosure and use of my medical information as described above for the purposes listed above. I understand that this authorization is voluntary and that I am acknowledging this authorization voluntarily.		

- 19. Read the Acknowledgement statement and click the button so that the response shows "Yes"
  - a. This acknowledgement is required in order to submit the form.

Α	ction Items		
			1 row
	Acknowledgement		
1	Yes	I authorize the disclosure and use of my medical information as described above for the purposes listed above. I understand that this authorization is voluntary and that I am acknowledging this authorization voluntarily.	
	$\smile$		

- 20. Scroll down and click "Submit".
  - a. If you receive an error message, go back through the form and ensure that everything has been filled out correctly and that the response to the Acknowledgement statement is "Yes".



- 21. Once submitted, a Thank You message will appear and instruct you to check your Palomar student email address for more information.
  - a. It is important that you monitor your Palomar student email address as this is where you will receive notifications regarding the status of your COVID-19 Vaccination eForm.
  - b. Note: a form ID number will appear at the upper, right-hand corner of your screen. Please reference this number when contacting the Palomar Vaccine and Exemptions team about your form.



- 22. Log into your Palomar student email and read the email notification about your form.
  - a. The subject line of the email will say "Submitted: COVID-19 Vaccination eForm [form ID number]"
  - b. It is important that you monitor your Palomar student email address as this is where you will receive notifications regarding the status of your COVID-19 Vaccination eForm.
  - c. For help on how to access your Palomar student email address, please contact helpdesk@palomar.edu

#### **How to Request Medical Exemption**

- 23. Navigate to the COVID-19 Vaccination eForm
  - a. Follow the previous steps in "How to Navigate to COVID-19 Vaccination eForm"
- 24. Read the "Notice to Students" and "Authorization and Disclosure".
  - a. These sections explain the reasons for requiring this form and how the information in this form will be used.
  - b. It is important that you understand this information as you will be asked to authorize the use and disclosure of the information you provide in the form.
- 25. Scroll down to the Student Information section
  - a. Your student ID number, name, date of birth, and Palomar student email address should appear automatically.
- 26. Update your phone number, if needed
  - a. You may only edit your phone number in this section.
- 27. Scroll down to the COVID-19 Vaccination Information section



28. Click on the drop-down box and select "No".

COVID-19 Vac	cination Information
Read through and comp form from you before th in online classes will no	elete each section of this form as prompted. Please note, if you do not agree to these terms or if we do not receive this e first day of classes, you will not be allowed to attend in-person and could be dropped from all such classes. Enrollment t be affected.
*Have you been vaccinated for COVID-19?	No Yes

- 29. Click on the next drop-down and select "Yes-Medical"
  - a. Additional exemption information will appear once this is selected.

COVID-19 Vac	cination Information
Read through and compl form from you before the in online classes will not	ete each section of this form as prompted. Please note, if you do not agree to these terms or if we do not receive this first day of classes, you will not be allowed to attend in-person and could be dropped from all such classes. Enrollment be affected.
*Have you been	
vaccinated for	No 🗸
COVID-19?	
*Do you have a	
medical or religious	v
exemption?	
Discourse to a second attraction	Yes-Medical
Please note, completio	ion
logal exemption monitat	
Vaccination events are b	eing held at Palomar College campuses and are open to the public. For more information, please visit the Palomar
COVID-19 Vaccination	<u>mormauon webpage</u> .

- 30. Read the Exemption Information.
  - a. Note: a written statement from your healthcare provider must be obtained in order to claim to be medically exempt from receiving COVID-19 vaccination.
    - i. If you already have a written statement from your healthcare provider, please proceed to step 9. Otherwise, contact your healthcare provider to request this documentation.
    - ii. If you are unable to upload the required documentation at this time, you may save your form (see "How to Save COVID-19 Vaccination eForm") and finish submitting it at a later time.
- 31. Scroll down to the File Attachments section.
  - a. Here, you will need to upload a copy of your Medical Exemption Written Statement from your healthcare provider. (Note: make sure the copy is clear and legible before attaching)
  - b. In order to attach the document to the form, the document must be stored on the device that you are using to complete the form.
    - i. For additional help with how to save a copy of the document to your device, please proceed to step 10. Otherwise, you may skip to step 11.

File Attach	ments				
In order to submit	this form, all ap	propriate documentation must be attache	ed. Please ensure that the attachment is clear	and legible	
					1 row
Attachment Required	Action	Description ♦	Instructions $\Diamond$	File Name ⇔	Delete
1 🌓	Upload	Medical Exemption Written Statement	This statement must be submitted on the healthcare provider's office letterhead with their printed name, license number, signature, and date the statement is issued.		Delete

- 32. If you have not done so already, save a copy of your Medical Exemption Written Statement from your healthcare provider to the device you are using to complete the form.
  - a. If you are using a computer to complete the form, the document should be scanned and saved to the computer. If you do not have access to a scanner, you may use a mobile device with a camera (e.g. phone, tablet, etc.) to take a picture of the document. Upload the photo to a cloud platform (OneDrive, Google Drive, iCloud Drive, Samsung Cloud, etc.) or somewhere where you can access it over the internet (e.g. email it to yourself). Use a computer to download the photo and save it to the computer.
  - b. If you are using a mobile device that has a camera to complete the form, you may take a picture of the document, save it to the mobile device, and upload it straight to the form.

File Attachn	nents				
In order to submit th	is form, all ap	propriate documentation must be attache	ed. Please ensure that the attachment is clear	and legible.	
					1 row
Attachment Required	Action	Description $\Diamond$	Instructions $\Diamond$	File Name ⇔	Delete
	Upload	Medical Exemption Written Statement	This statement must be submitted on the healthcare provider's office letterhead with their printed name, license number, signature, and date the statement is issued.		Delete

33. Click the "Upload" button.

# 34. Click "My Device".



35. Browse your device and go to where you saved the copy of the document.

36. Select the file.

# 37. Click "Upload"

File Attachment	×
Choose From	
My Devid Upload Clear	
My Medical Exemption.jpg File Size: 18KB	

38. Once upload is complete, click "Done".

File Attachm	ent Done
Choose From	
My Device	
My Medical Exemption.jpg File Size: 18KB	
	Upload Complete

39. Scroll down to Action Items section.

		1 row
nowledgement		
No	I authorize the disclosure and use of my medical information as described above for the purposes listed above. I understand that this authorization is voluntary and that I am acknowledging this authorization voluntarily.	
n	owledgement	No         I authorize the disclosure and use of my medical information as described above for the purposes listed above. I understand that this authorization is voluntary and that I am acknowledging this authorization voluntarily.

- 40. Read the Acknowledgement statement and click the button so that the response shows "Yes"
  - a. This acknowledgement is required in order to submit the form.

Ac	tion Items			
			1 row	
1	Acknowledgement			
1	Yes	I authorize the disclosure and use of my medical information as described above for the purposes listed above. I understand that this authorization is voluntary and that I am acknowledging this authorization voluntarily.		
	$\smile$			

- 41. Scroll down and click "Submit".
  - a. If you receive an error message, go back through the form and ensure that everything has been filled out correctly and that the response to the Acknowledgement statement is "Yes".



- 42. Once submitted, a Thank You message will appear and instruct you to check your Palomar student email address for more information.
  - a. Note: a form ID number will appear at the upper, right-hand corner of your screen. Please reference this number when contacting the Palomar Vaccine and Exemptions team about your form.



- 43. Log into your Palomar student email and read the email notification about your form.
  - a. The subject line of the email will say "Submitted: COVID-19 Vaccination eForm [form ID number]"
  - b. It is important that you monitor your Palomar student email address as this is where you will receive notifications regarding the status of your COVID-19 Vaccination eForm.
  - c. For help on how to access your Palomar student email address, please contact helpdesk@palomar.edu

### How to Request Religious Exemption

- 1. Navigate to the COVID-19 Vaccination eForm
  - a. Follow the previous steps in "How to Navigate to COVID-19 Vaccination eForm"
- 2. Read the "Notice to Students" and "Authorization and Disclosure".
  - a. These sections explain the reasons for requiring this form and how the information in this form will be used.
  - b. It is important that you understand this information as you will be asked to authorize the use and disclosure of the information you provide in the form.
- 3. Scroll down to the Student Information section
  - a. Your student ID number, name, date of birth, and Palomar student email address should appear automatically.
- 4. Update your phone number, if needed
  - a. You may only edit your phone number in this section.
- 5. Scroll down to the COVID-19 Vaccination Information section



6. Click on the drop-down box and select "No".

COVID-19 Vaccination Information Read through and complete each section of this form as prompted. Please note, if you do not agree to these terms or if we do not receive this form from you before the first day of classes, you will not be allowed to attend in-person and could be dropped from all such classes. Enrollment in online classes will not be affected.	

- 7. Click on the next drop-down and select "Yes-Religious"
  - a. Additional exemption information will appear once this is selected.

COVID-19 Vaccination Information		
Read through and complete each section of this form as prompted. Please note, if you do not agree to these terms or if we do not receive this form from you before the first day of classes, you will not be allowed to attend in-person and could be dropped from all such classes. Enrollment in online classes will not be affected.		
*Have you been vaccinated for COVID-19?		
*Do you have a     medical or religious     exemption?		
Yes-Medical         Please note, completio         Yes-Religious         legal exemption information.		
Vaccination events are being held at Palomar College campuses and are open to the public. For more information, please visit the <u>Palomar</u> <u>COVID-19 Vaccination Information webpage</u> .		

- 8. Read the Exemption Information.
- 9. Use the Religious Exemption comment box to provide a brief description of your sincerely held religious belief, practice, or observance that conflicts with the requirement to receive a COVID-19 vaccination.

Exemption Information				
The Palomar Community College District provides reasonable accommodations for students whose sincerely held religious belief, practice, or observance conflicts with a Governing Board Policy, unless providing a reasonable accommodation would result in undue hardship on the conduct of the District's operations.				
To promote a safe and healthy workplace for employees, and to promote the health and safety of students and employees working and learning on the District's campus and facilities, and members of the community, the District requires that all students and employees receive a COVID-19 vaccination by [insert date] in order to be physically present on District premises. Students may use this form to request a religious accommodation if they have a sincerely held religious belief, practice, or observance that conflicts with the District's requirement that all students receive a COVID-19 vaccination. Please note that if your				
religious exemption is approved, you will still be required to follow all other safety protocols that are in place to mitigate the spread of COVID- 19 on District premises. You may also be asked to engage in additional safety measures, including but not limited to surveillance COVID-19 Antigen testing.				
Please briefly describe your sincerely held religious belief(s), practice(s), or observance(s) that conflicts with the requirement to receive COVID-19 vaccination.				
Exemption				

10. Scroll down to Action Items section.

tion Items		
		1 row
Acknowledgement		
No	I authorize the disclosure and use of my medical information as described above for the purposes listed above. I understand that this authorization is voluntary and that I am acknowledging this authorization voluntarily.	
	Acknowledgement	Acknowledgement          I authorize the disclosure and use of my medical information as described above for the purposes listed above. I understand that this authorization is voluntary and that I am acknowledging this authorization voluntarily.

- 11. Read the Acknowledgement statement and click the button so that the response shows "Yes"
  - a. This acknowledgement is required in order to submit the form.

Α	ction Items			
	Asku		1 row	
1	Yes	I authorize the disclosure and use of my medical information as described above for the purposes listed above. I understand that this authorization is voluntary and that I am acknowledging this authorization voluntarily.		
	$\smile$			

- 12. Scroll down and click "Submit".
  - a. If you receive an error message, go back through the form and ensure that everything has been filled out correctly and that the response to the Acknowledgement statement is "Yes".



- 13. Once submitted, a Thank You message will appear and instruct you to check your Palomar student email address for more information.
  - a. It is important that you monitor your Palomar student email address as this is where you will receive notifications regarding the status of your COVID-19 Vaccination eForm.
  - Note: a form ID number will appear at the upper, right-hand corner of your screen.
     Please reference this number when contacting the Palomar Vaccine and Exemptions team about your form.



- 14. Log into your Palomar student email and read the email notification about your form.
  - a. The subject line of the email will say "Submitted: COVID-19 Vaccination eForm [form ID number]"
  - b. It is important that you monitor your Palomar student email address as this is where you will receive notifications regarding the status of your COVID-19 Vaccination eForm.
  - c. For help on how to access your Palomar student email address, please contact helpdesk@palomar.edu.

### How to Save COVID-19 Vaccination eForm

- 1. Scroll down to the bottom of your form.
- 2. Click "Save".



- 3. Once saved, a Thank You message will appear and instruct you to check your Palomar student email address for more information.
  - a. It is important that you monitor your Palomar student email address as this is where you will receive notifications regarding the status of your COVID-19 Vaccination eForm.
  - b. Note: a form ID number will appear at the upper, right-hand corner of your screen. Please reference this number when contacting the Palomar Vaccine and Exemptions team about your form.

Form Result	<b>A</b> :			
Submit COVID-19 Immunization : Results	Form ID 102552			
Thank you for using the COVID-19 Vaccination eForm.				
You will receive an email with additional information shortly. Please check your Palomar student email address,				

- 4. To get back into your form and submit it, follow the instructions in the email notification.
  - a. The subject line of the email notification will be "Action Needed: COVID-19 Vaccination eForm [form id #]"
  - b. There will be links included in the email notification.