HOW TO: Upload COVID-19 Vaccine Record

DIRECTIONS: LBCC requires proof of COVID-19 vaccination or weekly testing from LBCC students who are taking inperson classes. If you are not taking an in-person class, you may still provide your vaccination record to LBCC.





5. Enter your Vaccine Type, Date of

First Dose & second Second Dose

Provide details of your COVID-19 vaccination record. By providing you vaccination I understand that I am required to provide accurate information in response to my COVI COVID-19 vaccination information. erstand that if I stated that I am fully vaccinated, that I must upload documentation

· By uploading this document, I consent to sharing my vaccine status with responsible pe

Instructions for submitting your vaccination record: Select your vaccine type and the date of each dose, if you have a future appointment fo Attach a file of your proof of vaccination for LBCC staff to review. Your proof of vaccination picture of your CDC Vaccination Card or CA Immunization Record or a screenshot of your Click Add Attachment and My Device. Select the file you wish to attach. Click the Uploa

*Vaccine Type

Vaccine Record Submission

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Instructions for submitting your vaccination record:

4. On the left side menu, select "Student Health Information" then click "Vaccine Record Submission"

Logir

password

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6. Select "Add Attachment" to attach a file or photo of your COVID-19 vaccination record



Date of First Dose **... ...** Date of Second Dose

Immunization Status NOTE: Only one dose is required Johnson & Johnson

> For further assistance, contact our Welcome Center Email: getstarted@lbcc.edu | Phone: 562-938-4049

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8. Click "Upload" to attach the file you selected



9. Click "Done" located on top right



10. Select "View Attachment" to verify your upload



12. Click "Submit" to finalize the upload. Your immunization status will change to *Pending* until it is reviewed by an LBCC Staff Member



Vaccine Record Submission



Provide details of your COVID-19 vaccination record. By providing you vaccination status below, you agree to the following:

11. Click "Save"

- I understand that I am required to provide accurate information in response to my COVID-19 Vaccination status. I hereby affirm that I have accurately and truthfully submitted my COVID-19 vaccination information.
- I understand that if I stated that I am fully vaccinated, that I must upload documentation of my vaccination status (e.g., a copy of my vaccine card or other similar official document confirming vaccination status).
- By uploading this document, I consent to sharing my vaccine status with responsible personnel associated with the LBCC

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