

## Updating Your COVID Vaccination Record with LBCC

## <u>Overview</u>

Long Beach City College will require a proof of their COVID-19 vaccination or weekly testing from LBCC students who are taking in-person classes. If you are not taking an in-person class, you may still provide your vaccination record to LBCC.

Stu	dents Attending In-	Person Classes						
1	From the		EACH LEGE	∽ Student Homepage	ል 수 ፡	$\odot$		
	Student		Tasks	Manage Classes	Academic Records	*		
	Homepage, click			_ <b></b>				
	the <b>Tasks</b> button			0000				
			1 To Do's					
					1 tons of the			
			Student Service	Student Account	Financial Aid			
			RA					
			چې م د		日氏			
2	Under <u>To Do List</u> ,	< Back		Tasks		<u>ش</u> 4	: 0	)
	19 Vaccination	To Do List	1					1
	Record		To Do List					
	Submission task	Completed Agreements				1 row		
						τ↓		
			Task		Due Date Stat	us		
		•	COVID-19 Vaccinatio	on Record Submission	Ass	igned >		
			· ·					

3	Review the	× Exit	COVID-19 Vaccination Record Submission	<b>↓</b>
	Introduction			
	information and click the	1 Introduction In Progress	Step 1 of 5: Introduction PROCEED 8	SUBMIT MY VACCINE RECORD
	PROCEED &		COVID-19 Vaccine Record Submission	
		2 COVID-19 Vaccine Record Not Started	You are enrolled in one or more classes that will be permitted to meet on campus at Long Beach City Col students, faculty, and staff, Long Beach City College requires proof of vaccination or weekly testing for all	ege. To ensure the safety of our students enrolled in on-site classes.
	RECORD button.	3 Confirm Contact Information Not Started	If you have received a COVID-19 vaccine, use the following pages to provide your vaccination record. If y two-dose vaccine, please report that first dose and complete this task. You will be issued a follow-up task	ou have only received one dose of a to report your future second dose.
		4 Submit Vaccine Record	If you have not received a vaccination, you will be required to complete weekly testing. Go to the college https://www.lbcc.edu/covid-19-info-students. For assistance, please contact Student Health Services at ht services.	website for instructions for testing at tps://www.lbcc.edu/student-health-
		Not Started	To Provide Your COVID-19 Vaccination Record to LBCC: 1. Review the agreement.	
		5 Complete Task Not Started	<ol> <li>Provide the type of vaccine and the date you received your first dose and second dose (if applicable). I shot even if you have a future appointment for your second dose. You can return to the Vaccination Reyour second dose to update your record using the Student Services tile.</li> <li>Upload an image (jpg, png file) or document (pdf) of proof of vaccination for LBCC staff to verify. Some Card, Digital Vaccination Record, or CA Immunization Record</li> </ol>	Please provide the date of your first cord screen after you have received examples include: CDC Vaccination
			Click the Proceed & Submit My Vaccine Record button to complete this step.	
4	Click the <b>Next</b>	COV	ID-19 Vaccination Record Submission	$\land$ :
	button to			
	continue.			Next >
		Step 1 of 5: Introdu	PROCEED & SUBMIT	/Y VACCINE RECORD
		COVID-19 Vaccine Record	d Submission	
5	Review the	× Exit	COVID-19 Vaccination Record Submission	<b>↓</b>
	Vaccination			Previous
	Record Collection	1 Introduction Complete	Step 2 of 5: COVID-19 Vaccine Record	I Accept
	Agreement		COVID-19 Vaccination Record Collection Agreement	,
	information and	2 COVID-19 Vaccine Record In Progress	Carefully review the information below and click I Accept to proceed.	
	click the <b>I Accept</b> button.	3 Confirm Contact Information Not Started	<ul> <li>By accepting the terms of this agreement, you agree to the following:</li> <li>1. I understand that I am required to provide accurate information in response to my COVID-19 Vaccacurately and truthfully submitted my COVID-19 vaccination information.</li> <li>2. I understand that if I stated that I am fully vaccinated, that I must upload documentation of my vaccacurated.</li> </ul>	ination status. I hereby affirm that I have ination status (e.g., a copy of my vaccine
	<u>Note</u> : Upon clicking I Accept, the Printable Page button will be	4 Submit Vaccine Record Not Started	<ul> <li>card or other similar official document confirming vaccination status).</li> <li>By uploading this document, I consent to sharing my vaccine status with responsible personnel as: College vaccination status programs.</li> <li>Your vaccination record information will not be shared. This information will be used for verification in and will not be used for any other reason or purpose.</li> </ul>	ociated with the Lon g Beach City order to attend on-site classes only
	activated, allowing you to print a copy	5 Complete Task Not Started	Printable Page	
	your records.			

6	Click the <b>Next</b> button to		COVID-1	9 Vaccination Record S	Submission			<u></u>	
	continue.						Previous	Next >	
		Step 2 of s	5: COVID-19	Vaccine Record				I Accept	
		COVID-19 Vac Carefully revie	cination Record	Collection Agreement below and click I Accept to proc	eed.				
7	Review your	× Exit		COVID-19 Va	ccination Record Submissior			<b>↓</b> :	
	contact information. After completing any necessary changes, click the <b>Confirm</b> button to proceed.							Previous	
		1 Introduction Complete	on	Step 3 of 5: Confirm Contac	ct Information			Confirm	
		2 COVID-19 Complete	Vaccine Record	Email					
		a)       Confirm Contact Information         in Progress         4)       Submit Vaccine Record         Not Started         5)       Complete Task Not Started	Email	Туре	Preferred				
			youremail@lbcc.edu	Home	~	>			
			<b>T</b> 1-	youremail@lbcc.edu	Business		>		
			Phone						
				+					
				Phone	Туре	Preferred			
				562/555-1234	Mobile	*	>		
							~		
8	Click the <b>Next</b>		CO/	VID-19 Vaccination Record S	Submission			¢	:
	continue.						Previous	s Next	>
		Step 3 of 5: Con	firm Contact In	formation				Confirm	

9	Select your	× Exit		COVID-19 Vaccinat	tion Record Submission	¢ :
	Vaccine Type					Previous
	dropdown.	1 Introduction	St	tep 4 of 5: Submit Vaccine Record	l i i i i i i i i i i i i i i i i i i i	Save
		2 COVID-19 Vaccine R Complete	F lecord	Provide details of your COVID-19 vaccination I understand that I am required to provide accu- accurately and ruthfully submitted my COVID- I understand that if I stated that I am fully vacci or other similar official document confirming va- By unloading this document. I consent to shore	record. By providing you vaccination status below, you agree to the fol urate information in response to my COVID-19 Vaccination status. I hereby at -19 vaccination information. inated, that I must upload documentation of my vaccination status (e.g., a co accination status).	lowing: firm that I have py of my vaccine card
		3 Confirm Contact Info Complete	ormation	<ul> <li>By uploading this document, i consent to shan programs.</li> </ul>		accination status
		4 Submit Vaccine Reco	ord .	Instructions for submitting your vaccination n Select your vaccine type and the date of each the second dose date. Attach a file of your proof of vaccination for LB Record or a screenshot of your Digital Vaccina Click Add Attachment and My Device. Select the Click the Unlead hutte and then Deventhere	record: dose. If you have a future appointment for your second dose, please return t 3CC staff to review. Examples include a picture of your CDC Vaccination Card tion Record. he file you wish to attach.	o this screen to add I or CA Immunization
		5 Complete Task Not Started		View your attachment, click Submit, and then S	Save.	
			A a v	Note: Your vaccination record information will not and will not be used for any other reason or purpo vaccine information.	t be shared. This information will be used for verification in order to attend or lose. These fields cannot be updated once LBCC have staff have approved a	i-site classes only nd reviewed your
				*Vaccine Type	<b>~</b>	
				Date of First Dose	J&J	
				Immunization Status	Moderna Eiii	
				Attachment Status	THE CI	
	<b>.</b>			Add Attachment Submit		
10	of First Dose.					
	If you have					
	second dose of			*Vaccine Type	Moderna 🗸	
	the vaccine,					
	enter the date under <b>Date of</b>		Da	ate of First Dose	04/01/2021	
	Second Dose.					
	<u>Note</u> : If J&J is		Date	of Second Dose	04/29/2021	
	selected, only					
	Vaccine is					
	required.					

11	Click the <b>Add</b>	× Exit COVID-19 Vaccination Record Submission ♀ :	
	Attachment	< Previous	
	button to attach	Introduction         Step 4 of 5: Submit Vaccine Record         Save	
	a file of your proof of vaccination for LBCC staff to review.	<ul> <li>Complete</li> <li>Complete&lt;</li></ul>	
12	Click the <b>My</b> <b>Device</b> button and select the file you wish to attach.	Introduction       Step 4 of 5: Submit Vaccine Record       Supervision       Supervision         Ordine Complete       Step 4 of 5: Submit Vaccine Record       Supervision       Supervision       Supervision         Outfort 19 Vaccination that the step is	



15	Click the View		× Exit	COVID-19 Vaccination Record Submission	4 <b>:</b>
	Attachment			Previous	Next >
	button to see the		1 Introduction	Step 4 of 5: Submit Vaccine Record	Save
	attachment.		Complete COVID-19 Vaccine Record Complete	<ul> <li>Provide details of your COVID-19 vaccination record. By providing you vaccination status below, you agree to the following:</li> <li>I understand that I am required to provide accurate information in response to my COVID-19 Vaccination status. I hereby affirm tha accurately and truthfully submitted my COVID-19 vaccination information.</li> <li>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 or other similar official document confirming vaccination status).</li> </ul>	t I have y vaccine card
			3 Confirm Contact Information Complete	<ul> <li>By uploading this document, I consent to sharing my vaccine status with responsible personnel associated with the LBCC vaccination programs.</li> </ul>	ion status
			4 Submit Vaccine Record Complete	Instructions for submitting your vaccination record:     Select your vaccine type and the date of each dose. If you have a future appointment for your second dose, please return to this so the second dose date.     Attach a file of your proof of vaccination for LBCC staff to review. Examples include a picture of your CDC Vaccination Card or CA I Record or a screenshot of your Digital Vaccination Record.     Click Add Attachment and MV Device. Select the file you wish to attach.	reen to add Immunization
			5 Complete Task In Progress	<ul> <li>Click the Upload button and then Done when complete.</li> <li>View your attachment, click Submit, and then Save.</li> </ul>	
				Note: Your vaccination record information will not be shared. This information will be used for verification in order to attend on-site cla and will not be used for any other reason or purpose. These fields cannot be updated once LBCC have staff have approved and revie vaccine information.	asses only wed your
				"Vaccine Type   Moderna 🗸	
				Date of First Dose 04/01/2021	
				Date of Second Dose 04/29/2021	
				Immunization Status	
				View Attachment         Submit           Please View Attachment Before Submitting         VaccineRecord.png	
	Note: If the View	i Firefox prevented	d this site from opening a pop-up window	v. <u>O</u> ptions	×
	Attachment window does not	× Exit		Allow pop-ups for pscs.lbcc.edu	<u></u>
	appear, a pop-up blocker may be			Don't show this message when pop-ups are blocked	Previous
	preventing the window from		sten	Show 'https://pscs.lbcc.edu/psc/ps_10/view/%7bV2%7dLzYq6BxdxZMBycy4gq3Y	Save
	opening. Click	Complete	Step		
	open the window.				
16	Press the <b>Save</b>	× Exit		COVID-19 Vaccination Record Submission	<u> </u>
					Previous
		1 Introducti Complete	on Step	o 4 of 5: Submit Vaccine Record	Save

17	Press the <b>Submit</b> button.	<b>Note:</b> Your vaccination record information will not be shared. This information will be used for verification in order to attend on-site classes only and will not be used for any other reason or purpose. These fields cannot be updated once LBCC have staff have approved and reviewed your vaccine information.	
	Once submitted, your Immunization Status will change to <u>Pending</u> until it is reviewed by an LBCC Staff member.	"Vaccine Type       Moderna         Date of First Dose       04/01/2021         Date of Second Dose       04/29/2021         Immunization Status       Pending         Attachment Status       Submitted         View Attachment Before Submitting       VaccineRecord.png	
18	Press the <b>Next</b>	COVID-19 Vaccination Record Submission	
	button to move		
	to the next page.	Previous	
		Step 4 of 5: Submit Vaccine Record	
19	Press the <b>Submit</b>	× Exit COVID-19 Vaccination Record Submission $\triangle$	
	button to complete the submission.	Previous Submit	
		1     Introduction     Step 5 of 5: Complete Task	
		Complete Click Submit to Complete Task Click Submit to Complete Task Be sure to click the submit button to complete this task. For additional information about Long Beach City College's COVID-19 response, visit https://www.lboc.edu/covid-19-info-students.	
		Complete Complete Complete Complete Click Submit to Complete Task Be sure to click the submit button to complete this task. For additional information about Long Beach City College's COVID-19 response, visit https://www.lbcc.edu/covid-19-info-students. To return to the student Homepage, click on the top right corner of this page. Click Submit to Complete Task Be sure to click the submit button to complete this task. For additional information about Long Beach City College's COVID-19 response, visit https://www.lbcc.edu/covid-19-info-students. To return to the student Homepage, click on the top right corner of this page.	
		Complete       COVID-19 Vaccine Record Complete       Click Submit to Complete Task         Complete       Be sure to click the submit button to complete this task. For additional information about Long Beach City College's COVID-19 response, visit https://www.lbcc.edu/covid-19-info-students. To return to the student Homepage, click on the top right corner of this page.         Submit Vaccine Record Complete       Submit Vaccine Record	
		Complete Com	

## **Updating Your COVID Vaccination Record**

Students who are not attending in-person classes still have the option to update their COVID-19 vaccination record with LBCC. Please follow the steps below to complete this process.



3	Select your <u>Vaccine</u>		Student Service 🏠 🎝 🗄 🧭
	<u>Type</u> from the	Student Service	Vaccine Record Submission Save
	dropdown.	Am My Orientations	Provide details of your COVID-19 vaccination record. By providing you vaccination status below, you agree to the following: <ul> <li>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 ruthfully submitted my COVID-19 vaccination information information.</li> </ul>
		ightarrow My Placement Results	<ul> <li>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).</li> <li>By uploading this document, I consent to sharing my vaccine status with responsible personnel associated with the LBCC vaccination status</li> </ul>
		🛃 My Degree Planner	programs. Instructions for submitting your vaccination record:
		💭 My Educational Plan	<ul> <li>Select your vaccine type and the date of each dose. If you have a future appointment for your second dose, please return to this screen to add the second dose date.</li> <li>Attach a file of your proof of vaccination for LBCC staff to review. Examples include a picture of your CDC Vaccination Card or CA Immunization Record or a screenshot of your Digital Vaccination Record.</li> </ul>
		My Participation Agreements	<ul> <li>Click Add Attachment and My Device. Select the file you wish to attach.</li> <li>Click the Upload button and then Done when complete.</li> <li>View your attachment, click Submit, and then Save.</li> </ul>
		🛶 Starfish	Note: Your vaccination record information will not be shared. This information will be used for verification in order to attend on-site classes only and will not be used for any other reason or purpose. These fields cannot be updated once LBCC have staff have approved and reviewed your
		🛓 Qless	vaccine information.
		Student Health Information	Vaccine Type
		Vaccine Record Submission	Date of First Dose
			Date of Second Dose Moderna
			Attachment Status
			Add Attachment Submit
4	Enter the <b>Date of First</b>		Student Service 🟠 🛆 : 🔗
	Dose.	Student Service	Vaccine Record Submission Save
	If you have received a	My Orientations	Provide details of your COVID-19 vaccination record. By providing you vaccination status below, you agree to the following: <ul> <li>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</li> </ul>
	second dose of the	My Placement Results	<ul> <li>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).</li> <li>By uploading this document, I consent to sharing my vaccine status with responsible personnel associated with the LBCC vaccination status</li> </ul>
	vaccine, enter it under Date of Second Dose.	My Degree Planner	programs. Instructions for submitting your vaccination record:
	4	My Educational Plan	<ul> <li>Select your vachine type and the date of each dose. In you have a future appointent for your second dose, prease return to this screen to add the second dose date.</li> <li>Attach a file of your proof of vaccination for LBCC staff to review. Examples include a picture of your CDC Vaccination Card or CA Immunization Record or a screenshot of your Diotal Vaccination Record</li> </ul>
	Note: If J&J is selected,	My Participation Agreements	Click Add Attachment and My Device. Select the file you wish to attach.     Click the Upload button and then Done when complete.     View your attachment, click Submit, and then Save.
	Vaccine is required.	Starfish	Note: Your vaccination record information will not be shared. This information will be used for verification in order to attend on-site classes only and will not be used for any other reason or purpose. These fields cannot be updated once LBCC have staff have approved and reviewed your
	4	Qless	vaccine information.
		Student Health Information 💦 📗	*Vaccine Type Moderna 🗸
		Vaccine Record Submission	Date of First Dose 04/01/2021
			Date of Second Dose 04/29/2021
			Immunization Status
			Attachment Status
			Add Attachment Submit



7	Press the <b>Upload</b> button	File Attachment	×
	to attach the selected file.	Choose From	
		Upload Clear VaccineRecord.png File Size: 1245KB	
8	When the upload is complete, click the <b>Done</b> button to return	File Attachment Choose From	Done
	to the <u>COVID Vaccine</u> <u>Record</u> screen.		
		My Device	
		VaccineRecord.png File Size: 1245KB	
			Upload Complete



11	Press the <b>Submit</b> button	Student Service 🏠 🇘 🗄 🧭
	to complete the	Vaccine Record Submission Save
	Submission.	<ul> <li>Provide details of your COVID-19 vaccination record. By providing you vaccination status below, you agree to the following:         <ul> <li>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.</li> <li>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).</li> <li>By uploading this document, I consent to sharing my vaccine status with responsible personnel associated with the LBCC vaccination status programs.</li> </ul> </li> <li>Instructions for submitting your vaccination record:         <ul> <li>Select your vaccine type and the date of each dose. If you have a future appointment for your second dose, please return to this screen to add the second dose date.</li> <li>Attach a file of your proof of vaccination fr LBCC staff to review. Examples include a picture of your CDC Vaccination Card or CA Immunization Record or a screenshot of your Digital Vaccination Record.</li> <li>Click Add Attachment and My Device. Select the file you wish to attach.</li> <li>Click the Upload button and then Done when complete.</li> <li>View your attachment, click Submit, and then Save.</li> </ul> </li> <li>Note: Your vaccination record information will not be shared. This information will be used for verification in order to attend on-site classes only and will not be used for any other reason or purpose. These fields cannot be updated once LBCC have staff have approved and reviewed your vaccine information.</li> </ul>
		*Vaccine Type Moderna V
		Date of First Dose 04/01/2021
		Date of Second Dose 04/29/2021
		Immunization Status
		Attachment Status Pending
		View Attachment         Submit           Please View Attachment Before Submitting         VaccineRecord.png
12	Once submitted, your	*Vaccine Type Moderna
	change to Pending until	vaccine type moderna +
	it is reviewed by an	Date of First Dose 04/01/2021
	LBCC Staff member.	
	Thank you for undating	Date of Second Dose 04/29/2021
	your COVID vaccination	Immunization Status Pending
	record with LBCC.	Attachment Status Submitted