

Covid-19 Vaccination Status - Confirmation & Authorization

Effective June 2021

Q: Why is a Confirmation & Authorization Disclosure is Needed?

A: Based on currently available information, this is to confirm that you have been vaccinated and are no longer at high risk for serious illness; thus, you may be exempted from certain restrictions once admitted to the Court, which may include wearing of masks.

Q: What happens with my information, and isn't it protected by the Health Insurance Portability and Accountability Act (HIPAA)?

A: HIPAA does not apply to the Courts; thus, it is not a violation for Courts to request this information. The Court understands your reasonable interest to maintain privacy; this information will only be used for legitimate court purposes related to court operations and safety for the public and staff that are permitted to enter the facility. Information collected will not be considered a Public Record.

Q: What if I did not get a vaccine (or) choose not to sign a consent?

A: You will be required to answer the Covid-19 Questionnaire, and may not be exempted from operational and health related restrictions that are in place for the protection of the public and staff that are in the Court facility.

Covid-19 Vaccine Confirmation

I hereby confirm that I have received (2) doses of the Pfizer or Moderna vaccine (or) 1 dose of the Johnson & Johnson vaccine and have passed the required effectiveness wait period for the dosage received.

OPTION #1 I do not have my vaccination card with me

Where did you receive your vaccination?

Pharmacy or Location Name: _____

Location City: _____

Location State: _____

OPTION #2 I have my vaccination card with me

Court Staff Witness

Staff Witness Signature: _____

Printed Name of Authorized Staff: _____

Date: _____

By signing this authorization, I agree to allow the Ohio Department of Health to access and verify my Covid-19 vaccination information if needed and attest the above selection is accurate and truthful.

Printed Name (Neatly)

Signature

Date

Phone #