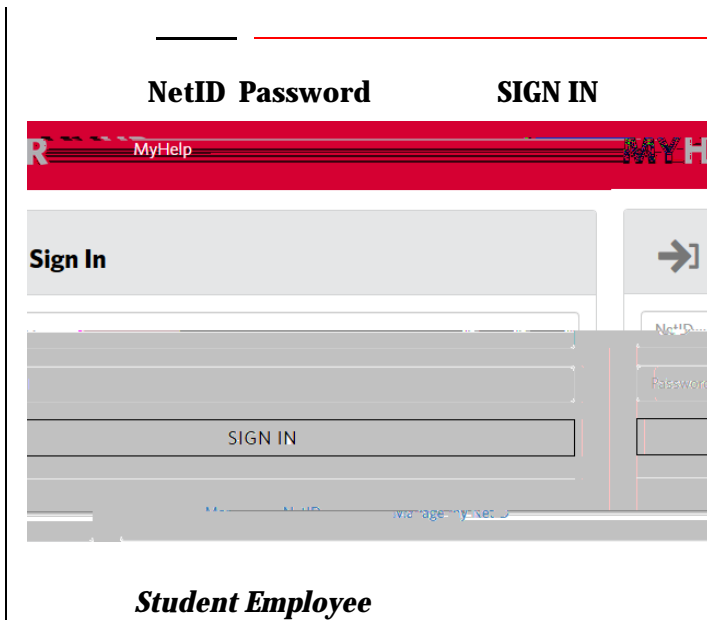
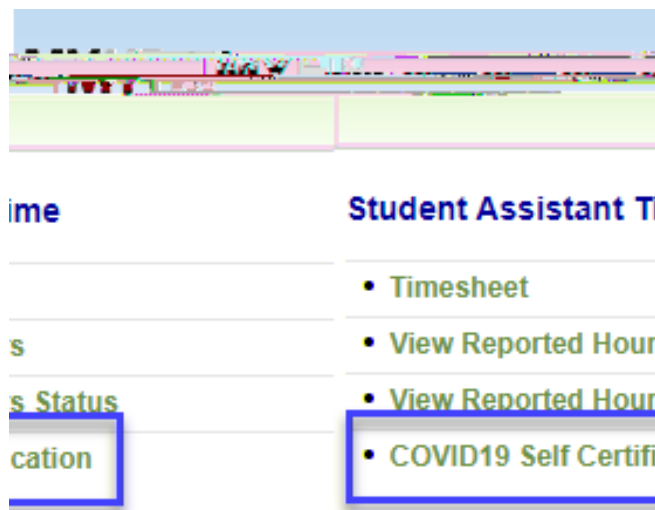


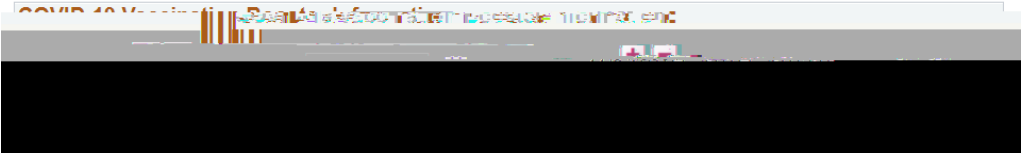


Overview



Page Navigation and Self-Certification





Section II: Self-Certification of COVID-19 Vaccination Status

You must select one of the following options.

I understand that I may be expected to provide supporting documentation to substantiate my request.

from the State of California, letter from a health care provider, etc. Code
I understand that I may be expected to provide supporting documentation to substantiate my request.

Vaccination Record Card only

Section III: Attachment Proof of COVID-19 Vaccination
I understand that I may be expected to provide supporting documentation to substantiate my request.

from the State of California, letter from a health care provider, etc. Code
I understand that I may be expected to provide supporting documentation to substantiate my request.

