



T.C.
MERSİN VALİLİĞİ
İl Yazı İşleri Müdürlüğü



DAĞITIMLI
09.07.2021

Sayı :E-26002637-249-15001
Konu :Covid-19 Aşı Sertifika Örnekleri

DAĞITIM YERLERİNE

İlgi : a) 29.06.2021 tarihli ve 13913 sayılı yazımız.
b) İçişleri Bakanlığının (İller İdaresi Genel Müdürlüğü) 09.07.2021 tarihli ve 11346 sayılı yazısı.

İçişleri Bakanlıđından alınan "Covid- 19 Aşı Sertifikaları Örnekleri" konulu ilgi (b) yazı ve ekleri ekte gönderilmiştir.

İlgi (b) yazı doğrultusunda bilgi ve geređini rica ederim.

Abdulhamit ERGUVAN
Vali a.
Vali Yardımcısı

Ek:
1- ilgi (b) yazı
2- ilgi (b) yazı ekleri (aşı sertifikası örnekleri)

Dağıtım:
Geređi:

Kaymakamlıklara
Mersin Limanı Mülki İdare Amirliğine
Mersin İl Emniyet Müdürlüğüne
Mersin İl Jandarma Komutanlığına
Sahil Güvenlik Akdeniz Bölge
Komutanlığına

Bilgi:
Mersin Özel Kalem Müdürlüğüne
Mersin İl Sağlık Müdürlüğüne

Bu belge, güvenli elektronik imza ile imzalanmıştır.

Doğrulama Kodu: CYm2B2-U4zsbg-icXXfS-JjbxaO-1JhyUKCo Doğrulama Linki: <https://www.turkiye.gov.tr/icisleri-ebys>

Akkent Mahallesi Hüseyin Okan Merzeci Bulvarı No:662 33160 - Yenişehir / Mersin
Telefon No: (324)238 25 54 Faks No: (324)238 81 12
e-Posta: yaziisleri@mersin.gov.tr İnternet Adresi: <http://www.mersin.gov.tr>
Kep Adresi: icisleribakanligi@hs01.kep.tr

Bilgi için: Sabire TOPLU
Veri Hazırlama Ve Kont.İşletmeni
Telefon No:





T.C.
İÇİŞLERİ BAKANLIĞI
İller İdaresi Genel Müdürlüğü



T.C. İÇİŞLERİ BAKANLIĞI
İLLER İDARESİ
GENEL MÜDÜRLÜĞÜ

Sayı :E-89780865-153-11346
Konu :Covid-19 Aşı Sertifikaları Örnekleri

09.07.2021

DAĞITIM YERLERİNE

İlgi : 28.06.2021 tarihli ve 10582 sayılı Genelgemiz.

İlgi Genelgemizle **Bangladeş, Brezilya, Güney Afrika, Hindistan, Nepal, Sri Lanka, Afganistan, Pakistan, Birleşik Krallık, İran, Mısır ve Singapur**'dan ülkemize gelen kişilere yönelik uygulanacak tedbirler belirlenmiş, bu ülkeler dışındaki **diğer ülkelerden** gelenlerden tüm sınır kapılarımızdan (kara, hava, deniz, demiryolu) ülkemize girişlerde girişten en az 14 gün önce **aşı yaptırıldığına** ve/veya ilk PCR pozitif test sonucunun 28. gününden başlamak üzere **hastalığı son 6 ay içinde hastalığı geçirdiğine** dair ilgili ülke resmi otoritelerince düzenlenen belgeyi ibraz edenlerden ayrıca **negatif sonuçlu PCR/hızlı antijen testi raporu ibrazı talep edilmeyeceği** ve bu kişiler için karantina tedbiri uygulanmayacağı bildirilmiştir

Dışişleri Bakanlığının çeşitli yazılarıyla **Fas Krallığı, Ekvador, Letonya, Hırvatistan, Avusturya, Moldova ve Yeni Zelanda** makamlarınca tanzim edilen aşı sertifikası veya hastalığın geçirildiğini gösterir belgeler Bakanlığımızla paylaşılmıştır.

Bahse konu aşı sertifikalarının ve hastalığın geçirildiğini gösterir belgelerin örnekleri ekte gönderilmektedir.

Bilgi ve gereğini arz ve rica ederim.

H. Kürşat KIRBIYIK
Bakan a.
İller İdaresi Genel Müdürü

Ek: Aşı Sertifikası Örnekleri

Dağıtım:

Gereği:

81 İl Valiliğine

Hudut Kapısı Mülki İdare Amirlikleri

Emniyet Genel Müdürlüğüne

Bilgi:

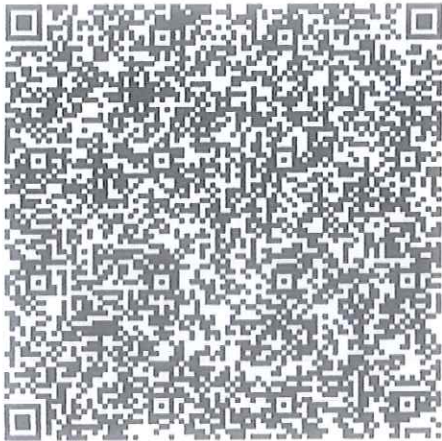
Dışişleri Bakanlığına

Sağlık Bakanlığına

Bu belge, güvenli elektronik imza ile imzalanmıştır.

Doğrulama Kodu: 1o3JGO-/+/WI2-tVFgXU-sXDnDP-3DUbAWMj Doğrulama Linki: <https://www.turkiye.gov.tr/icisleri-ebys>





 Republik Österreich



EU Digital COVID Certificate

Zertifikataussteller:
Bundesministerium für Soziales, Gesundheit,
Pflege und Konsumentenschutz

Certificate issuer:
Federal Ministry of Social Affairs, Health,
Care and Consumer Protection

Eindeutige Zertifikatkennung | Unique certificate identifier:
URN:UVCI:01:AT:7B25LPEJIODKFGKPYCQ877YZ#W

GENESUNGSZERTIFIKAT | CERTIFICATE OF RECOVERY

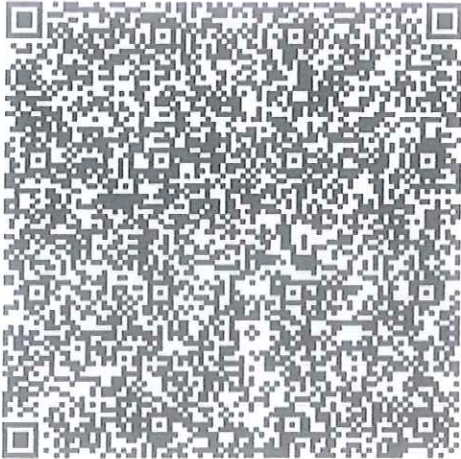
Nachname(n), Vorname(n) Surname(s), Forename(s)	Mustermann, Max
Geburtsdatum (JJJJ-MM-TT) Date of birth (yyyy-mm-dd)	1940-01-01
Zielkrankheit oder -erreger Disease or agent targeted	COVID-19
Erstes positives NAAT-Testergebnis (JJJJ-MM-TT) First positive NAAT test result (yyyy-mm-dd)	2021-04-26
Zertifikat gültig ab (JJJJ-MM-TT) Certificate valid from (yyyy-mm-dd)	2021-05-25
Zertifikat gültig bis (JJJJ-MM-TT) Certificate valid until (yyyy-mm-dd)	2021-10-26
Mitgliedstaat oder Drittstaat Member State or third country	Österreich Austria

Dieses Zertifikat ist ausschließlich von der adressierten Person für die in den jeweiligen Verordnungen festgelegten Zwecke zu verwenden. Eine missbräuchliche Verwendung oder Verfälschung des Zertifikats kann strafrechtliche Konsequenzen nach sich ziehen.

This certificate is to be used exclusively by the addressed person for the purposes specified in the respective regulations. Misuse or falsification of the certificate may result in criminal prosecution.

Dieses Zertifikat ist kein Reisedokument. Die wissenschaftlichen Erkenntnisse über COVID-19-Impfungen und -Tests sowie über die Genesung von einer COVID-19-Infektion entwickeln sich ständig weiter, auch im Hinblick auf neue besorgniserregende Virusvarianten. Bitte informieren Sie sich vor der Reise über die am Zielort geltenden Gesundheitsmaßnahmen und damit verbundenen Beschränkungen.

This certificate is not a travel document. The scientific evidence on COVID-19 vaccination, testing and recovery continues to evolve, including with regard to new virus variants of concern. Before travelling, please check the applicable public health measures and related restrictions applicable at the point of destination.



 Republik Österreich



EU Digital COVID Certificate

Zertifikatsaussteller:
Bundesministerium für Soziales, Gesundheit,
Pflege und Konsumentenschutz

Certificate issuer:
Federal Ministry of Social Affairs, Health,
Care and Consumer Protection

Eindeutige Zertifikatkennung | Unique certificate identifier:
URN:UVCI:01:AT:BOEBCATY0EHC7AD8D53XNUG4C#O

TESTZERTIFIKAT | TEST CERTIFICATE

Nachname(n), Vorname(n) Surname(s), Forename(s)	Testnachname, Test
Geburtsdatum (JJJJ-MM-TT) Date of birth (yyyy-mm-dd)	1930-05-06
Zielkrankheit oder -erreger Disease or agent targeted	COVID-19
Art des Tests Type of test	PCR-Test auf SARS-CoV-2
Name des Tests und Testhersteller Test name and manufacturer	PCR
Datum/Zeitpunkt der Probenahme (JJJJ-MM-TT hh:mm) Date/time of test sample collection (yyyy-mm-dd hh:mm)	2021-06-15 10:06
Testzentrum oder -einrichtung Test centre or facility	ACV Austria Center
Mitgliedstaat oder Drittstaat Member State or third country	Österreich Austria

Testergebnis | Test result

NICHT NACHGEWIESEN
NOT DETECTED

Dieses Zertifikat ist ausschließlich von der adressierten Person für die in den jeweiligen Verordnungen festgelegten Zwecke zu verwenden. Eine missbräuchliche Verwendung oder Verfälschung des Zertifikats kann strafrechtliche Konsequenzen nach sich ziehen.

This certificate is to be used exclusively by the addressed person for the purposes specified in the respective regulations. Misuse or falsification of the certificate may result in criminal prosecution.

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SAMPLE



COVID-19
RESPONSE
VACCINES

• UN System-wide COVID-19 Vaccination Programme

VACCINATION RECORD

This confirms that the person named herein has been vaccinated under the UN System-Wide COVID-19 Vaccination Programme

Full Name : Individual_First_Name Individual_Last_Name

Date of Birth : 06-01-2011
MM.DD.YYYY



VACCINE	VACCINE NAME / LOT NUMBER	DATE MM-DD-YYYY	CLINIC SITE
1 st Dose COVID-19	COVISHIELD™ (ChAdOx1 nCoV-19) - AstraZeneca / 4121Z005	05-13-2021	AF - Kabul - UNOCA Compound
2 nd Dose COVID-19	COVISHIELD™ (ChAdOx1 nCoV-19) - AstraZeneca / 4121Z005	06-23-2021	AF - Kabul - UNOCA Compound

This is an official United Nations document. Please keep this record which includes medical information about the vaccines you have received

CERTIFICADO DE VACUNACIÓN

1. DATOS DEL PACIENTE

NOMBRE	APELLIDO	SEXO	EDAD	N° HISTORIA CLÍNICA
--------	----------	------	------	---------------------

2. DATOS DE VACUNACION

VACUNA	DOSIS	FECHA VACUNA	PRÓXIMA VACUNA	VACUNADOR
--------	-------	--------------	----------------	-----------

3. DATOS DE EMISION

UBICACIÓN	ENTIDAD	USUARIO QUE GENERÓ EL CERTIFICADO
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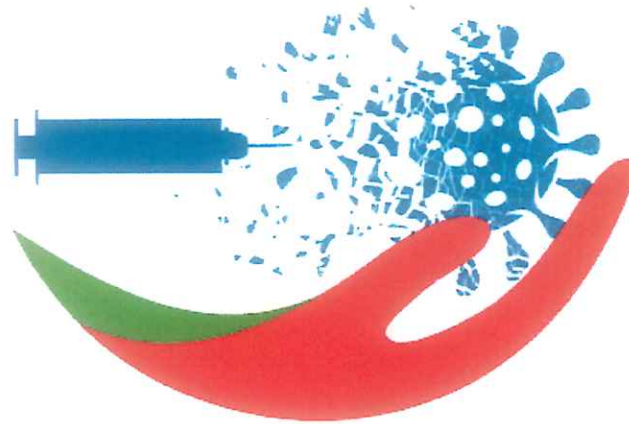




المملكة المغربية

ⵜⴰⴳⴷⵓⴷⴰ ⵜⴰⴳⴷⵓⴷⴰ

Royaume du Maroc



Présentation du Pass Vaccinal Marocain

Pass Vaccinal

Les différents modèles

Version PDF Imprimable

BLOC IDENTITAIRE

	V. Imp.	V. Mob.
N° ID CNIE/CS	✓	✓
Nom	✓	✓
Prénom	✓	✓
Genre	✓	-
Date de Naissance	✓	✓
Nationalité	✓	-

BLOC VACCINATION

	V. Imp.	V. Mob.
Date D1	✓	-
Type Vaccin D1	✓	-
N° de lot Vaccin D1	✓	-
Date D2	✓	✓
Type Vaccin D2	✓	✓
N° de lot Vaccin D2	✓	-

BLOC AUTHENTICATION

	V. Imp.	V. Mob.
QR Code	✓	✓
Date d'émission	✓	-
Code à barre ID	✓	✓
N° Identifiant Pass	✓	✓

Version smartphone

Application d'authentification du Pass Vaccinal

Mode d'authentification du pass vaccinal

PASS VACCINATION

Le Pass de Vaccinal peut être lue et authentifié via :

- Vérification Visuel
- Lecture QR Code : mode de cryptage utilisé AES et RSA
- Lecture Code à barre : ID du Pass Vaccinal

APPLICATION DE LECTURE

Mise à disposition d'une Application Mobile :

- Version Androïde / IOS
- Lecture du QR Code
- L'application peut être mise à disposition des entités souhaitant authentifié Pass

AUTRES DISPOSITIFS DE LECTURE

Mise à disposition des clés publics de cryptage utilisé :

- Lecteur de QR Code
- Implémentation dans les applications des acteurs (RAM Assistance, Verifly, IATA, etc.)

نتيجة التحقق →

BLOC VERIFICATION

Vaccination
Validité du vaccin

BLOC IDENTITAIRE & VACCINATION

N° ID CNIE/CS
Nom & prénom
Date vaccination

AB123456 (*)

ZOHRA MOUSSA | الزهرة موسى

02/06/2021

مسح جديد

(*) رقم بطاقة التعريف الوطنية بالنسخة المغربية ورقم بطاقة الإقامة أو رقم جواز السفر بالنسخة الجزائرية

(*) Numéro de la carte d'identité nationale pour les Marocains et numéro de la carte de séjour ou numéro de passeport pour les étrangers.

(*) National ID card number for Moroccans and resident card number or passport number for foreigners.

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Vaccination Certificate Potvrda o cijepljenju



Surname(s) and forename(s)
Prezime (prezimana) i ime (imena)
XXXXXXXX

Date of birth
Datum rođenja
XXXXXX

Unique certificate identifier
Jedinstveni identifikator potvrde
XXXXXXXXXXXXXXXXXXXX

Disease or agent targeted
Bolest ili agens na koji se cijpa

Vaccine/prophylaxis
Cjepivo/profilaksa

Vaccine medicinal product
Naziv lijeka

Vaccine marketing authorisation
Nositelj odobrenja za stavljanje

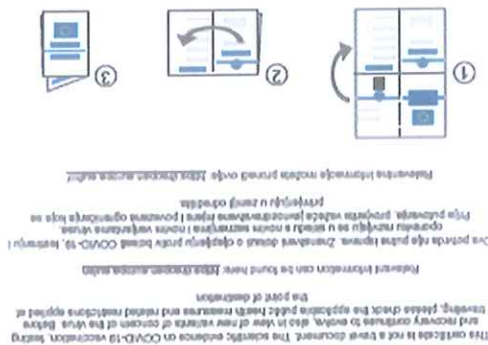
Holder or manufacturer
Cjepiva u promet ili proizvođač cjeviva

Number in a series of
vaccinations/doses and the overall
number of doses in the series
Broj primljenih cjeviva/doza
u odnosu na potreban broj

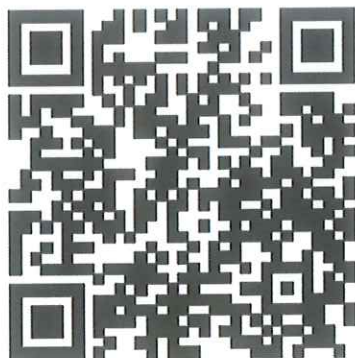
Date of vaccination
datum cijepljenja, uz naznaku datuma
posljednje primjene doze

Member State of vaccination
Država članica cijepljenja

Certificate issuer
izdavačelj potvrde



Certificate of Recovery Potvrda o preboljenju



Surname(s) and forename(s)
Prezime (prezimana) i ime (imena)
XXXXXXXX

Date of birth
Datum rođenja
XXXXXX

Unique certificate identifier
Jedinstveni identifikator potvrde
XXXXXXXXXXXXXXXXXXXX

Disease or agent the citizen
has recovered from
Bolest ili agens koje je građanin prebolio

Date of first positive test result
Datum prvog pozitivnog rezultata testa

Member State of test
Država članica testiranja

Certificate issuer
Izdavatelj potvrde

Certificate valid from
Potvrda vrijedi od

Certificate valid until
(not more than 180 days after
the date of first positive test result)
Potvrda vrijedi do
(180 dana od datuma prvog pozitivnog
rezultata testa)



This certificate is not a travel document. The scientific evidence on COVID-19 vaccination, testing and recovery continues to evolve, also in view of new variants of concern of the virus. Before leaving, please check the applicable public health measures and related restrictions applied at the point of destination.

Posjednik potvrde može biti izdvojen od ostalih osoba. Znanstveni dokazi o oboljenju protiv bolesti COVID-19, testiranju i oporavku neprestano se u skladu s novim varijantama virusa i posredstvom ograničenja koje se primjenjuju u zemlji odobriju.

Posjednik potvrde nije putni dokument. Znanstveni dokazi o oboljenju protiv bolesti COVID-19, testiranju i oporavku neprestano se u skladu s novim varijantama virusa i posredstvom ograničenja koje se primjenjuju u zemlji odobriju.



Test Certificate Potvrda o testiranju



Surname(s) and forename(s)
Prezime (prezimana) i ime (imena)
XXXXXXXX

Date of birth
Datum rođenja
XXXXXX

Unique certificate identifier
Jedinstveni identifikator potvrde
XXXXXXXXXXXXXXXXXXXX

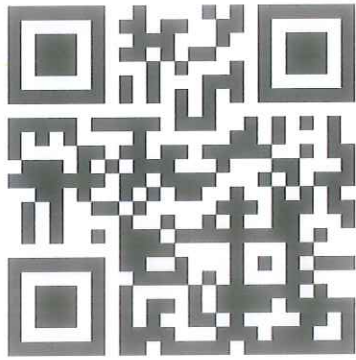
Disease or agent targeted
Bolest ili agens na koji se čija
vrsta testa
Type of test
Test name (optional for NAAT)
Naziv testa (nije obavezno za NAAT test)
Test manufacturer (optional for NAAT)
Proizvođač testa (nije obavezno za NAAT test)
Date and time of the test sample collection
Datum i vrijeme uzimanja uzorka
Result of the test
Rezultat testa
Testing centre or facility
Centar ili objekt za testiranje
Member State of test
Država članica testiranja
Certificate issuer
Izdavatelj potvrde

Ministarstvo zdravlja
Republika Hrvatska
COVID-19
EU Digital COVID Certificate

This certificate is not a travel document. The scientific evidence on COVID-19 vaccines, their use and recovery continues to evolve, which may result in changes to the rules. Before travelling, please check the applicable rules. Health requirements and related restrictions apply at the point of destination.
Potvrda o testiranju can be found here: <https://www.mz.hr>
Ova potvrda nije putna isprava. Znanstveni dokazi o djelotvornosti vakcina COVID-19, korištenju i oporavku nastavlja se razvijati i mogu rezultirati izmjenama pravila. Prije putovanja, provjerite važeća pravila putovanja i povezana ograničenja koja se primjenjuju u zemlji odredišta.
Hrvatska informacija vezana za potvrdu: <https://www.mz.hr>

EU Digital COVID Certificate

EU digitalna COVID potvrda



Sertifikāta unikālais identifikators

Unique certificate identifier

123456789012

Uzvārds(-i) un vārds(-i)
Surname(s) and forename(s)

Linuža Beisere - Elizabete Alise
Dompalma

Dzimšanas datums
Date of birth

12.02.1992.
dd.mm.yyyy

ES digitālais Covid-19 sertifikāts

EU Digital COVID Certificate



Latvijas Republika
Republic of Latvia

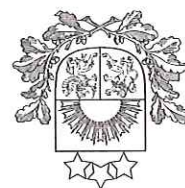
www.covid19sertifikats.lv

This certificate is not a travel document. The scientific evidence on COVID-19 vaccination, testing and recovery continues to evolve, also in view of new variants of concern of the virus. Before traveling, please check the applicable public health measures and related restrictions applied at the point of destination.

Sis sertifikāts nav ceļošanas dokuments. Zinātnes atziņas par Covid-19 vakcināciju, testēšanu un pārsliņošanu turpina mainīties, tostarp jaunu draudīgu vīrusa variantu dēļ. Pirms došanās ceļā, lūdz, iepazīstīties ar spēkā esošajiem sabiedrības veselības aizsardzības pasākumiem un ar tiem saistītajiem ierobežojumiem, ko piemēro galamērķa vietā.

National Health Service

Nacionālais veselības dienests



Testēšanas sertifikāts

Test Certificate

Testa objekts

Mērķa slimība vai ierosinātais
Disease or agent targeted

Testa objekts

Testa veids
Type of test

Testa objekts

Testa nosaukums
Test name

Testa objekts

Testa ražotājs
Test manufacturer

29.05.2021. 21:34
dd.mm.yyyy hh:mm

Testa parauga ņemšanas datums un laiks
Date and time of the test sample collection

29.05.2021. 21:34
dd.mm.yyyy hh:mm

Testa rezultāta datums un laiks
Date and time of the test result production

Testa objekts

Testa rezultāts
Result of the test

Testa objekts

Testēšanas centrs vai komplekss
Testing centre or facility

Latvijas Republika
Republic of Latvia

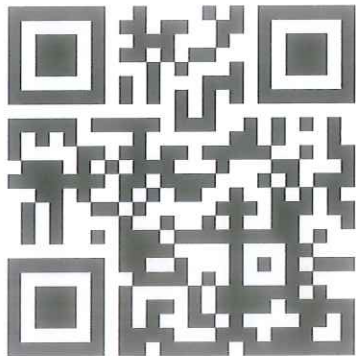
Testēšanas dalībvalsts
Member State of test

Nacionālais veselības dienests
National Health Service

Sertifikāta izdevējs
Certificate issuer

Testa objekts

Sertifikāta unikālais identifikators
Unique certificate identifier



Sertifikāta unikālais identifikators

Unique certificate identifier

123456789012

Uzvārds(-i) un vārds(-i)
Surname(s) and forename(s)

Linuža Beisere - Elizabete Alise
Dompalma

Dzimšanas datums
Date of birth

12.02.1992.
dd.mm.yyyy

ES digitālais Covid-19 sertifikāts

EU Digital COVID Certificate



Latvijas Republika

Republic of Latvia

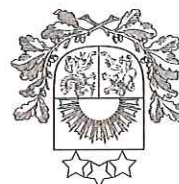
www.covid19sertifikats.lv

This certificate is not a travel document. The scientific evidence on COVID-19 vaccination, testing and recovery continues to evolve, also in view of new variants of concern of the virus. Before travelling, please check the applicable public health measures and related restrictions applied at the point of destination.

Šis sertifikāts nav ceļošanas dokumenti. Zinātnes atziņas par Covid-19 vakcināciju, testēšanu un pārslimošanu turpina mainīties, tostarp jaunu draudīgu vīrusa variantu dēļ. Pirms došanās ceļā, lūdzu, iepazīstīties ar spēkā esošajiem sabiedrības veselības aizsardzības pasākumiem un ar tiem saistītajiem ierobežojumiem, ko piemēro galamērķa valstī.

National Health Service

Nacionālais veselības dienests



Pārslimošanas sertifikāts

Certificate of Recovery

Testa objekts

Slimība vai ierosinātais, ko persona ir pārslimojusi

Disease or agent the person has recovered from

10.04.2021.

Pirmā pozitīva MAAT testa datums

dd.mm.yyyy

Date of the first positive MAAT test result

Latvijas Republika

Testēšanas dalībvalsts

Republic of Latvia

Member State of test

Nacionālais veselības dienests

Sertifikāta izdevējs

National Health Service

Certificate issuer

10.04.2021.

Laiks, no kura sertifikāts ir derīgs

dd.mm.yyyy

Certificate valid from

10.04.2021.

Laiks, līdz kuram sertifikāts ir derīgs

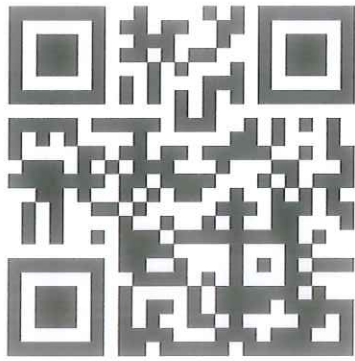
dd.mm.yyyy

Certificate valid until

Testa objekts

Sertifikāta unikālais identifikators

Unique certificate identifier



Sertifikāta unikālais identifikators

Unique certificate identifier

123456789012

Uzvārds(-i) un vārds(-i)
Surname(s) and forename(s)

Linuža Beisere - Elizabete Alise
Dompalma

Dzimšanas datums
Date of birth

12.02.1992.
dd.mm.yyyy

ES digitālais Covid-19 sertifikāts

EU Digital COVID Certificate



Latvijas Republika
Republic of Latvia

www.covid19sertifikats.lv

This certificate is not a travel document. The scientific evidence on COVID-19 vaccination, testing and recovery continues to evolve, also in view of new variants of concern of the virus. Before traveling, please check the applicable public health measures and related restrictions applied at the point of destination.

Šis sertifikāts nav ceļošanas dokuments. Zinātnes atziņas par Covid-19 vakcināciju, pētīšanu un pārslimošanu turpina mainīties, tostarp jaunu draudīgu vīrusa variantu dēļ. Pirms došanās ceļā, lūdz, iepazīties ar spēkā esošajiem sabiedrības veselības aizsardzības pasākumiem un ar tiem saistītiem ierobežojumiem, ko piemēro galamērķa vietā.

National Health Service

Nacionālais veselības dienests



Vakcinācijas sertifikāts
Vaccination Certificate

Mērķa slimība vai ierosinātais
Disease or agent targeted

Vakcīna/profilakse
Vaccine/prophylaxis

Vakcīna (zāles)
Vaccine medicinal product

Vakcīnas tirzniecības atļaujas turētājs vai
ražotājs

Numurs pēc kārtas vakcīnu/devu sērijā un
kopējais vakcīnu/devu skaits sērijā.

Number in a series of vaccinations/doses and the
total number of vaccinations/doses in the series

Vakcinācijas datums (novāda datumu, kad
saņēma katru un pēdējā deva)

Date of vaccination (date of each dose received
and of the latest dose received)

Latvijas Republika

Member State of vaccination

Sertifikāta izdevējs

Certificate issuer

Sertifikāta unikālais identifikators

Unique certificate identifier

Testa objekts

Nacionālais veselības dienests

Republic of Latvia

Testa objekts

National Health Service

Testa objekts

Latvijas Republika

Republic of Latvia

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Testa objekts

Anexa nr. 12
La ordinul MSMPS
Nr. 93 din 05.02 2021

Certificat de vaccinare împotriva Covid-19

Свидетельство о вакцинации против COVID-19
Vaccination certificate against COVID-19

NUME PRENUME / ИМЯ ФАМИЛИЯ / NAME SURNAME:

Sex / Секс / Sex: _____ Vârsta / Возраст / Age: _____

IDNP / Удостоверение личности / ID: _____

Domiciliu / Адрес / Adress: _____

INFORMAȚII DESPRE VACCIN / ИНФОРМАЦИЯ О ВАКЦИНАХ / VACCIN INFO

Tip vaccin / Тип вакцины / Type of vaccine: VACCIN ÎMPOTRIVA COVID-19

Doza 1 Доза 1 Dose 1	Produs / Производить / Product	Lot număr / серийный номер/ Batch no	Data Vaccinării / Дата вакцинации/ Date of vaccination

Doza 2 Доза 2 Dose 2	Produs / Производить / Product	Lot număr / серийный номер/ Batch no	Data Vaccinării / Дата вакцинации/ Date of vaccination

Centrul de vaccinare / Центр вакцинации / Vaccination center:

Semnătura responsabilului

Ștampila

<Name>

By email: <email>

Ref: <reference number>

Dear <Name>

Confirmation of COVID-19 Vaccination

Thank you for your request to the Ministry of Health New Zealand (the Ministry) for confirmation of COVID-19 vaccination on <Date 2021>. This has been provided under the Privacy Act 2020 (the Act).

The table below confirms the details of the COVID-19 vaccine administered to <full name> in New Zealand. This information was sourced from New Zealand's COVID Immunisation Register (CIR) on <date data was exported>.

Dose	Last Name	First Name/s	NHI Number	Date of Birth	Vaccine name	Vaccine sponsor ¹	Disease targeted	Date Administered	Batch number
Dose 1					Comirnaty (COVID-19 mRNA vaccine)	Pfizer New Zealand Limited	SARS-CoV-2		
Dose 2					Comirnaty (COVID-19 mRNA vaccine)	Pfizer New Zealand Limited	SARS-CoV-2		

You have a right to ask the Ministry to amend any incorrect information we hold about you. Please contact us if you believe any personal information requires correction or if you require any further information held about you in the CIR.

I trust that this information fulfils your request. You have the right to seek a review of any decisions made regarding this request under section 70 of the Act from the Privacy Commissioner. The Commissioner can be contacted at: enquiries@privacy.org.nz or by calling 0800 803 909.

Yours sincerely

Joanne Gibbs
National Director
COVID-19 Vaccine and Immunisation Programme

¹ This is the New Zealand equivalent of a vaccine market authorisation holder.