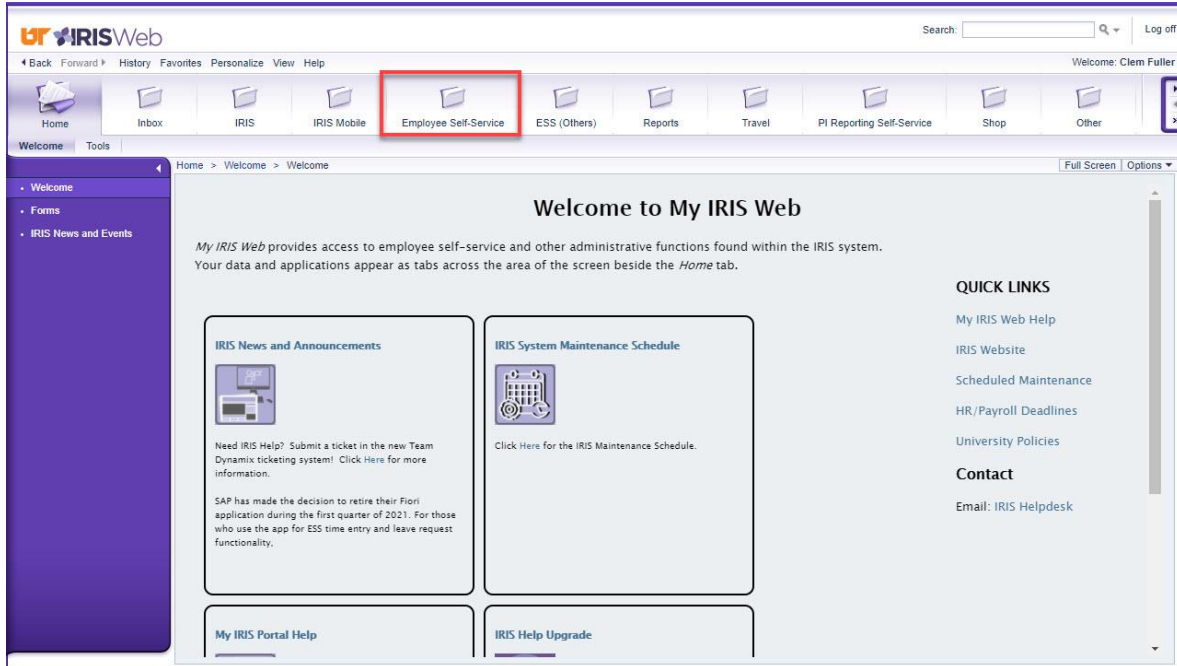


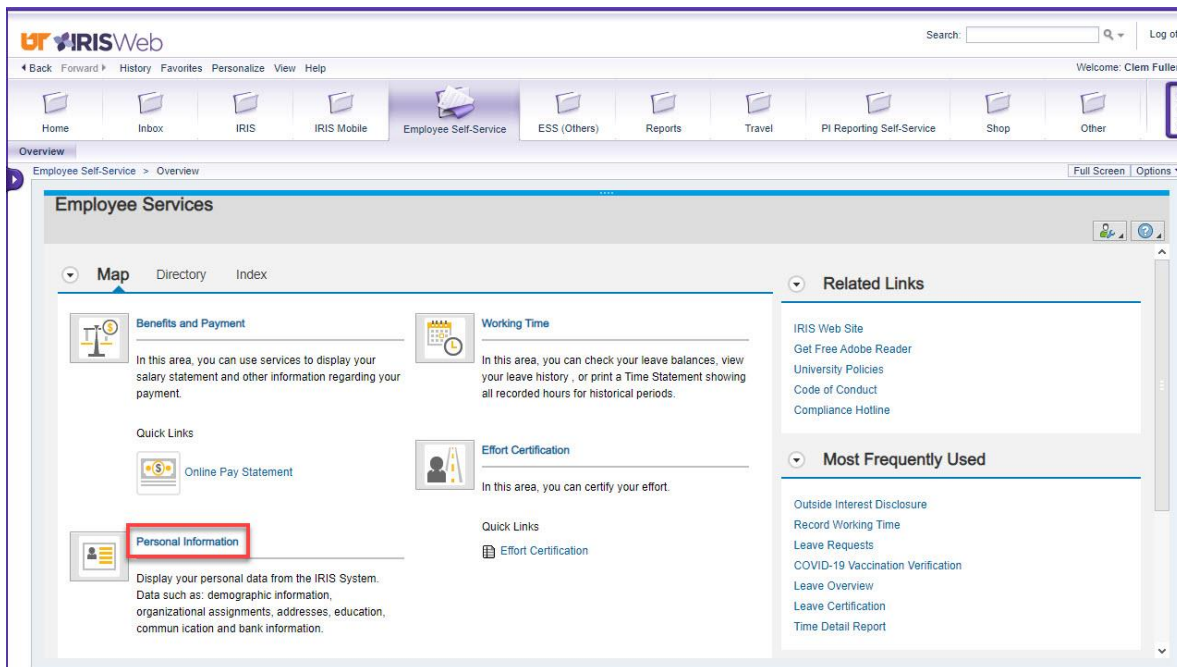
COVID-19 Vaccination Verification Form

To access the **COVID-19 Vaccination Verification Form**, open the IRIS Web portal in an internet browser at *irisweb.tennessee.edu* and then follow the instructions below.

1. Click the **Employee Self-Service** icon on the toolbar at the top of the page.



2. Click the **Personal Information** header in the center of the page.



NOTE: Be sure to allow pop-ups in your browser and only click the **Submit** button once for best performance.


3. Click **COVID-19 Vaccination Verification** in the *Personal Profile* section.

Personal Information


Back

Personal Profile


Use the links below to access your personal information.

 [Personal Profile](#)


Use this link to display your personal data (for example, address information or bank details). Some information (such as Emergency Contact Address) may be updateable. Use the link below for the Personal Data Form to update information that is not available for update in ESS. The Personal Data Form should be submitted to your local Human Resource Office.

 [Outside Interest Disclosure](#)


This form is for the University of Tennessee President, Chancellors, and other designated administrators to disclose outside interests as required by the University's Conflict of Interests Policy.

 [Personal Data Form](#)


Use this link to download the Personal Data Form to change information in your Personal Profile.

 [Personal Data Form Instructions](#)


Use this link to download instructions for completing the Personal Data Form to change information in your Personal Profile.

 [My HR128 Training History](#)

Use this link to check your HR 128 status using the training history stored in IRIS.


 [COVID-19 Vaccination Verification](#)

This form is used to provide information on your COVID-19 vaccinations.

 [Influenza Vaccination Verification](#)

This form is used to provide information on your influenza vaccinations.

4. The "COVID-19 Vaccination Verification" form is displayed.



This form is used to provide information on your immunizations.

Employee Name: **Fuller, Clem**
Personnel Number: **00900052**

Please allow pop-ups in your browser and only click the submit button once for best performance.

Statement: The University of Tennessee requires a COVID-19 vaccination.


Purpose: The purpose of this vaccine is to protect students, employees, family members and the community from COVID-19 by vaccinating as many personnel as possible as recommended by the Center for Disease Control (CDC) and the President's executive order.


Scope: The term "personnel" includes all staff, faculty, student employees and volunteers.


Exemption Criteria: Personnel may be exempted due to medical contraindications to the vaccine(s) or due to religious reasons.


Compliance Timeline: Personnel are required to receive the COVID-19 vaccine as recommended by the CDC and the President's executive order.


Please indicate your status below:

I received the Moderna 1st vaccine on 

I received the Moderna 2nd vaccine on 

I received the Pfizer 1st vaccine on 

I received the Pfizer 2nd vaccine on 

I received the Johnson and Johnson vaccine on 

I am exempt from vaccinations based on:

Medical contraindication

Religious exemption

Attach Documentation: No file chosen

By clicking Submit you are acknowledging that the information provided in this form is true to the best of your knowledge.

Complete the "COVID-19 Vaccination Verification" form by following the instructions below.

1. Verify your name and personnel number.

This form is used to provide information on your immunizations.

Employee Name: **Fuller, Clem**
Personnel Number: **00900052**

2. Review this section for information about the process.

Statement: The University of Tennessee requires a COVID-19 vaccination.

Purpose: The purpose of this vaccine is to protect students, employees, family members and the community from COVID-19 by vaccinating as many personnel as possible as recommended by the Center for Disease Control (CDC) and the President's executive order.


Scope: The term "personnel" includes all staff, faculty and student employees.


Exemption Criteria: Personnel may be exempted due to medical contraindications to the vaccine(s) or due to religious reasons.


Compliance Timeline: Personnel are required to receive the COVID-19 vaccine as recommended by the CDC and the President's executive order.


3. Check the appropriate box to update your status.


Please indicate your status below:

I received the Moderna 1st vaccine on 

I received the Moderna 2nd vaccine on 

I received the Pfizer 1st vaccine on 

I received the Pfizer 2nd vaccine on 

I received the Johnson and Johnson vaccine on 

I am exempt from vaccinations based on:

Medical contraindication

Religious exemption

4. The choices are:

- Record the date you received the vaccination(s). Type in **MM/DD/YYYY** format or use the calendar to select the date.

Please indicate your status below:

I received the Moderna 1st vaccine on

I received the Moderna 2nd vaccine on

I received the Pfizer 1st vaccine on

I received the Pfizer 2nd vaccine on

I received the Johnson and Johnson vaccine on

I am exempt from vaccinations based on:

Medical contraindication

Religious exemption

OR

- Opt out of vaccinations based on either a medical contraindication or a religious exemption.

I am exempt from vaccinations based on:

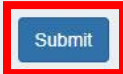
Medical contraindication

Religious exemption

5. To attach documentation, click **Choose File** and then navigate to the file that you want to attach.

Attach Documentation: Clem Fuller ...tion card.pdf


6. Click **Submit**.





By clicking Submit you are acknowledging that the information provided in this form is true to the best of your knowledge.


7. You will receive a confirmation message at the bottom of the screen after you submit your selection.


Please indicate your status below:

I received the Moderna 1st vaccine on 

I received the Moderna 2nd vaccine on 

I received the Pfizer 1st vaccine on 

I received the Pfizer 2nd vaccine on 

I received the Johnson and Johnson vaccine on 

I am exempt from vaccinations based on:

Medical contraindication

Religious exemption

Attach Documentation: No file chosen

COVID-19 vaccination submission was successful. Close your browser.



By clicking Submit you are acknowledging that the information provided in this form is true to the best of your knowledge.