



Department of Health
REPUBLIC OF SOUTH AFRICA

COVID-19 VACCINATION RECORD CARD



VACCINEE DETAILS

Surname													
First name(s)													
Identity number/ Passport number													
Next appointment date	Y	Y	Y	Y	M	M	D	D					
EVDS vaccination number													

VACCINE DOSE	VACCINE NAME	MANUFACTURER	BATCH NUMBER	VACCINE DATE					
1 st Dose				Y	Y	M	M	D	D
2 nd Dose				Y	Y	M	M	D	D
3 rd Dose				Y	Y	M	M	D	D

VACCINATOR DETAILS

Surname	First name(s)
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Signature</p> </div> <div style="width: 45%;"> <p>DATE: Y Y Y Y M M D D</p> </div> </div>	



COVID-19 VACCINATION RECORD CARD

Bring this vaccination record to every vaccination
and when visiting your health facility.

If you have experienced any adverse events after leaving the
Vaccination Site, please report to the Adverse Events Following
Immunisation system at **AEFI@health.gov.za**
or call **071 302 8949**

For more information about COVID-19 and COVID-19 vaccine, please
visit **www.sacoronavirus.co.za**

COVID-19 PUBLIC HOTLINE **0800 029 999**

OFFICIAL WHATSAPP HELP SERVICE

Send **Hi** to **0600 123 456** on WhatsApp