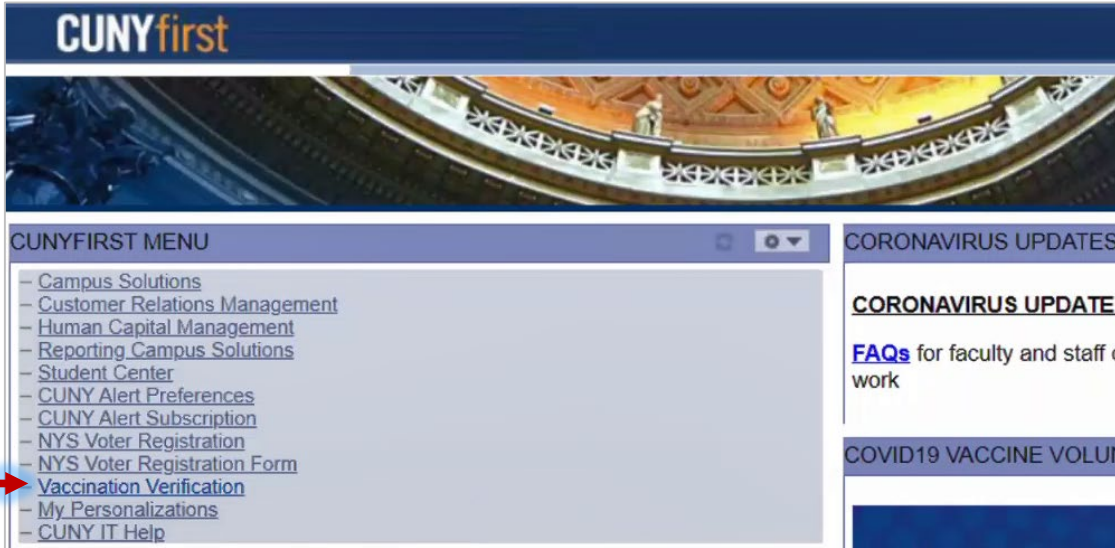


# Vaccination Verification for CUNY Employees

1. Log into CUNYfirst and click on the **Vaccination Verification** link within the CUNYfirst Menu.



2. The Vaccine Verification page will have the Vaccine Verification Program description, a link to the University’s Guidelines for CUNY Fall 2021 Reopening, and the ability for you to select whether you would like to self-identify as [fully vaccinated](#). Select the radio button next to the choice that applies to you.

The screenshot shows the 'SARS-CoV-2(COVID-19) Vaccine Verification Program' page. At the top, there are tabs for 'Favorites', 'Main Menu', and 'Vaccination Verification'. The user's name 'Sam Arnie' and ID '10567567' are displayed. The page title is 'SARS-CoV-2(COVID-19) Vaccine Verification Program'. Below the title is a heading 'Let's End this Pandemic for Good!' and a paragraph stating that CUNY takes the health and safety of employees very seriously and requests optional vaccination status information. An 'IMPORTANT' section states that employees who are not fully vaccinated or who choose not to disclose their status will be required to submit to COVID-19 testing. A paragraph explains the opt-out option for weekly testing, requiring vaccine information and supporting documentation. A link to the 'University's Guidelines for CUNY Fall 2021 Reopening Where Not Everyone is Fully Vaccinated' is provided. The 'Vaccination Information' section contains two radio button options: 'I am fully vaccinated as per this definition:' (with a red arrow pointing to it) and 'I am not fully vaccinated OR I do not wish to disclose my vaccination status.' The definition for fully vaccinated includes: '2 weeks have passed since receiving my second dose in a 2-dose series OR 2 weeks have passed since receiving my single-dose vaccine.' At the bottom, there are 'Save Draft' and 'Submit' buttons.

If you have selected the **I am fully vaccinated...** radio button:

(See page 4 for instructions on selecting the other choice)

1. Select the vaccination type that you've received from the **Vaccination Type** dropdown menu.
2. Input the date when you received the vaccine dose that resulted in your full vaccination.

**\*Vaccination Information**

Vaccination Type:

Vaccination Date:  Date you received your last vaccine dose to become fully vaccinated.

- AstraZeneca/Oxford
- AstraZeneca/SII
- Covidshield
- Johnson and Johnson - Janssen
- Moderna
- Pfizer
- Sinopharm
- Sinovac-CoronaVac

3. If you have a valid New York State Excelsior Pass, click the checkmark in the **NYS Excelsior Pass Information** section and fill in the information below. The information entered has to match the information you provided to Excelsior exactly in order to accurately verify your vaccination record.

**Note:** Excelsior information will not be used to update any information in CUNYfirst.

**NYS Excelsior Pass Information**

I have a valid NYS Excelsior Pass and consent to the NYS Department of Health's sharing and verifying information with the City University of New York for the purpose of supporting CUNY's policy to protect the health and safety of its employees and students. For more information on NYS Excelsior Pass click [here](#).

If selected, please enter the information you provided in the Excelsior App. This information will only be used for Excelsior verification and will not update CUNYfirst.

Last Name:  Date of Birth:

First Name:  Zip Code:

Telephone:

\*Please attach copy of your Covid-19 Vaccination Record and NYS Excelsior Pass below.

4. Upload your Vaccination Record and NYS Excelsior Pass (if available) in the **Supporting Documents** section. Select document type from the dropdown menu and click the **Upload** button to upload a document from your computer. Click **View** to review your uploaded file before submission.

**Supporting Documents**

Please select a vaccination document type to upload.

Nber	*Vaccination document	Attached File	Upload		
	<input type="text" value="Covid-19 Vaccination Record"/>				

**Supporting Documents**

Please select a vaccination document type to upload.

Nber	*Vaccination document	Attached File	View		
1	Covid-19 Vaccination Record	Sample_CDC_Card.jpg			
2	NYS Excelsior Pass	Sam_s_Pass.pdf			

- As a final step, click the checkmark in the **Attestation** section to confirm that you have read and agreed to the terms and conditions of the University vaccination policy.
- Click the **Submit** button.

**Attestation**

Please read and respond by checking the boxes

By agreeing to the terms and conditions of the University vaccination [policy](#) below, I hereby certify that the SARS-CoV-2 (COVID-19) vaccine information I have voluntarily provided to The City University of New York is to the best of my knowledge and belief accurate and I further certify that that the documentation I have provided/attached/uploaded is a true copy or facsimile of my original Covid-19 Vaccine Health Record/Document/Form/Letter provided to me at the time of my vaccines. I acknowledge that I am submitting this information and documentation at the request of The City University of New York and in support of the University's policies and responsibility to protect the health, safety, and welfare of the CUNY community, its students, faculty and staff.

- You will see a confirmation pop-up window. Click **OK** to submit.

**Message**

Once submitted you will not be able to modify the data. Do you want to submit? (20010,834)

- Once submitted, status fields will appear at the top of the page to display **Submitted - HR** for the Covid-19 Vaccination Record and **Pending** for the Excelsior submission. You may return to this page to view your approval status at any time.

Approval **Submitted - HR**
Excelsior **Pending**

**Vaccination Status**

I am fully vaccinated as per this definition:

- 2 weeks have passed since receiving my second dose in a 2-dose series OR
- 2 weeks have passed since receiving my single-dose vaccine.

If you have selected the **I am not fully vaccinated...** radio button:

1. Select the accurate response to the question in the **Fully (100%) Remote Work Agreement** section.

**Vaccination Status**

I am fully vaccinated as per this definition:

- 2 weeks have passed since receiving my second dose in a 2-dose series OR
- 2 weeks have passed since receiving my single-dose vaccine.

I am not fully vaccinated **OR** I do not wish to disclose my vaccination status.

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**Fully (100%) Remote Work Agreement**

Do you have an approved Fully 100% Remote Work Accommodation agreement for post August 16, 2021?

Yes

No

No, submitted not approved yet

2. If you select **Yes**, please enter the expiration date of the agreement.

**Fully (100%) Remote Work Agreement**

Do you have an approved Fully 100% Remote Work Accommodation agreement for post August 16, 2021?

Yes 11/16/2021 31 End Date for 100% Remote Agreement.

No

No, submitted not approved yet

3. Upload your Remote Work Agreement Documentation in the **Supporting Documentation** section by clicking the **Upload** button and selecting a document from your computer. Click **View** to review your uploaded file before submission.
4. Click the **Submit** button.

**Supporting Documents**

Please select a vaccination document type to upload.

Vaccination document	Attached File	Upload		
Remote Work Agreement Documer <span style="float: right;">▼</span>		<a href="#">Upload</a>	+	🗑

**Supporting Documents**

Please select a vaccination document type to upload.

Vaccination document	Attached File	View		
Remote Work Agreement Document	Remote_Work_Agreement.pdf	<a href="#">View</a>	+	🗑

Save Draft
Submit