## Notification for Vaccination for Persons not at Residence

## (New Coronavirus Disease)

Date (year)\_\_\_\_\_ (month)\_\_\_\_ (day)\_\_\_\_\_

	To: Mayor of Oshu	City						
			Applicant Ac	Name dress				
			Phone nu	mber				
		Relationship to Applicant □Self			☐Family member living together			
						□Other	(	)
subm	nit this Notification for	Vaccination	n for Persons not at Res	idence as	I would like	e to receive	e vaccinati	ons in Osh
Person being Vaccinated	Reading							
	Name	☐Same as						
	Address listed on Residence Certificate	☐Same as	₹					
	Address of residence	☐Same as applicant	₸					
	Date of birth		(year)		(month)			(day)
Vaccination Ticket No. (10 digits)								
Vaccination Situation		□Not vaccinated □Had one vaccination (Date Maker )						
Reason for Notification		<ul> <li>□Work related transfer □Student boarding in remote location</li> <li>□Returning home for childbirth</li> <li>□Other unavoidable situation for being away from address on Residence</li> <li>Certificate ( )</li> </ul>						
Mailing Address		☐Same as	₸					