



RE: UW System Students Working at COVID-19 Vaccination Sites

FROM: _____
Name & Location of Vaccination Site/Clinic

This is to confirm that during the dates of September 1, 2021 – December 31 2021,

_____ was involved in activities related to vaccination in the
(student name)
State of Wisconsin (i.e. preparing the vaccine, administering the vaccine, gathering medical information of patient and monitoring patients post vaccine).

To qualify for the UW System’s tuition credit, students must complete a minimum of 16 hours. Please complete this form for each site. Space provided for multiple shifts below. Direct questions about eligibility to the Office of Scholarships and Financial Aid at: finaid@uwp.edu.

Date

Signature of Supervisor of Student

Number of Hours

Printed Name of Supervisor

Date

Signature of Supervisor of Student

Number of Hours

Printed Name of Supervisor

Date

Signature of Supervisor of Student

Number of Hours

Printed Name of Supervisor

Date

Signature of Supervisor of Student

Number of Hours

Printed Name of Supervisor

TO BE COMPLETED BY THE STUDENT:

Student Name

Student ID Number

STUDENT: Submit completed form to Scholarships and Financial Aid at: finaid@uwp.edu.