



**St Helena  
Government**

Health & Social Care Portfolio  
Jamestown  
Saint Helena Island  
SAO  
STHL 1ZZ  
Email. [REDACTED]

**DATE**

Recipient's name  
Position, company  
Street name  
Town  
County/Country  
Postcode

**COVID-19 Vaccination Status – 2 doses received**

**Name:**  
**Date of Birth:**  
**Passport Number:**

This letter confirms that ..... has received COVID-19 vaccination overseas as part of the UK Government's Overseas Territories Vaccination Programme in the British Overseas Territory of St Helena.

Please use this letter as evidence of vaccination for travel purposes.

<b>Dose</b>	1 of 2	<b>Dose:</b>	2 of 2
<b>Date of vaccination</b>		<b>Date of vaccination</b>	
<b>Vaccine product</b>	Vaxzevria	<b>Vaccine product</b>	Vaxzevria
<b>Manufacturer</b>	AstraZeneca AB	<b>Manufacturer</b>	AstraZeneca AB
<b>Vaccine</b>	SARS CoV-2 antigen vaccine	<b>Vaccine</b>	SARS CoV-2 antigen vaccine
<b>Batch number</b>		<b>Batch number</b>	
<b>Disease targeted</b>	COVID-19	<b>Disease targeted</b>	COVID-19
<b>Country of vaccination</b>	St Helena	<b>Country of vaccination</b>	St Helena
<b>Administering centre</b>	Health Directorate, St Helena	<b>Administering centre</b>	Health Directorate, St Helena



FAIRNESS



INTEGRITY



TEAMWORK

St Helena Government, St Helena Island, South Atlantic Ocean, STHL 1ZZ

[www.sainthelena.gov.sh](http://www.sainthelena.gov.sh)

Should you have any queries regarding this letter please direct to [REDACTED], COVID-19 Administrator, via email [REDACTED] or via telephone number [REDACTED].

Yours sincerely,

[REDACTED]  
Senior Medical Officer



FAIRNESS



INTEGRITY



TEAMWORK

St Helena Government, St Helena Island, South Atlantic Ocean, STHL 1ZZ

[www.sainthelena.gov.sh](http://www.sainthelena.gov.sh)

ASCENSION ISLAND GOVERNMENT  
Dr William Hardy  
Senior Medical Officer  
Georgetown Hospital  
Ascension Island  
South Atlantic Ocean  
ASCN 1ZZ



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Georgetown  
Ascension Island  
ASCN 1ZZ

19 July 2021

### COVID-19 Vaccination Status – 2 doses received

Name: [REDACTED]

Date of Birth: [REDACTED]

Passport Number: [REDACTED]

This letter confirms that [REDACTED] has received COVID-19 vaccination overseas as part of the UK Government's Overseas Territories Vaccination Programme in the British Overseas Territory of Ascension

Please use this letter as evidence of vaccination for travel purposes.

Dose	1 of 2	Dose:	2 of 2
Date of vaccination	1 <sup>st</sup> Feb 2021	Date of vaccination	1 <sup>st</sup> May 2021
Vaccine product	Vaxzevria	Vaccine product	Vaxzevria
Manufacturer	AstraZeneca AB	Manufacturer	AstraZeneca AB
Vaccine	SARS CoV-2 antigen vaccine	Vaccine	SARS CoV-2 antigen vaccine
Batch number	B115	Batch number	B115
Disease targeted	COVID-19	Disease targeted	COVID-19
Country of vaccination	Ascension Island	Country of vaccination	Ascension Island
Administering centre	Georgetown Hospital Ascension Island	Administering centre	Georgetown Hospital Ascension Island

Should you have any queries regarding this letter please direct to: [REDACTED];  
Georgetown Hospital;

[REDACTED] Tel [REDACTED]; Fax [REDACTED]

Signed;

