**St. Clair County Vaccine Notification Sign Up**

St. Clair County Health Department is gathering data from individuals who live or work in St. Clair County that are interested in receiving the COVID-19 vaccine. By completing the Vaccine Notification Form, you will be added to a list to receive updates and notifications for the COVID-19 vaccine, which will include information on when you are able to sign up to receive your vaccine and how to sign-up for an appointment.

Please check with your medical provider to verify if you are able to receive the COVID-19 vaccine.

You will need the following information to fill out the form:

* **A contact email.** If you do not have an email, please provide an email of an individual that can receive the information on your behalf. Example: Son/daughter, grandson/daughter, friend, etc.
* **A contact phone number**-Cell phone number is preferred if you have one.
* Go to the St. Clair County website: co.st-clair.il.us
* Click on Visit The Covid-19 Page inside the pink banner at the top of the page
* Click the Vaccine Notification Sign Up box
* Read the notification and click Covid-19 Notification for Vaccine Sign-Up link at the bottom of the page
* The following questions will need to be answered and submitted on line:

COVID-19 Notification for Vaccine Availability

As the COVID vaccine continues to be distributed throughout the county, the St. Clair County Health Department is gathering data from INDIVIDUALS who live or work in St. Clair County to gauge interest in receiving the vaccine. The responses will be used to understand demand and build appropriate capacity to vaccinate. This is not a vaccine registry. It is a tool to assist in planning as additional vaccine is distributed. By completing the form, individuals will be added to a list to receive updates on COVID-19 vaccine availability including the timing and scheduling.  
  
Please note that the vaccine supply is still limited. High risk individuals as defined by the CDC are currently being prioritized.  
  
All information will be kept confidential. Data may change as new guidance becomes available.  
  
Please complete only once

\* Required

First Name \*

Last Name \*

Address \*

City \*

State \*

Zip Code \*

Health Department Jurisdiction \*

St Clair County Health Department

East Side Health District

Unknown

Phone Number (###-###-### format) \*

Email Address \*

Date of Birth (mm/dd/yyyy) \*

Are you a Healthcare Worker? \*

Healthcare personnel are defined by the CDC as paid and unpaid workers in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials. Inclusion in Phase 1a is not dependent upon payment for a person’s work or job title. Situations associated with higher risk of transmission include caring for COVID- 19 patients. This includes; Hospital Settings: Nurses & Nursing Assistants, Physicians (MD, NP, PA), Respiratory Technicians, Pharmacists, Emergency Medical Services (EMS), including Fire Departments staff acting as EMS & Air Medical Transport (Rotor & Fixed Wing), COVID Sample Lab workers, Organ Harvesters & Students on Clinical Rotations. Other workers in hospital settings at elevated risk, such as Environmental Services Staff, Reception Staff, X-Ray Technician’s, Phlebotomists, Infectious Waste Workers, Dietary staff, Laundry staff, security staff, Crisis intervention staff, Interpreters, Clergy/pastoral/chaplains. Non-hospital healthcare: Clinicians, such as Nurses & Nursing Assistants, Physicians (MD, NP, PA), Respiratory Technicians, Dentists & Hygienists, Pharmacists, Plasma and Blood Donation Staff, Morticians, Public Health Nurses, Home Health, School Nurses, Optometrist, COVID Testing Staff, Dermatologist, Dialysis staff, Urgent care workers, Corrections nurses/aides, Physical/occupational/speech therapists, Vaccine clinic workers, Emergency Medical Services (EMS), including Fire Departments staff acting as EMS & Air Medical Transport (Rotor & Fixed Wing). Other Congregate Care: Nurses and Nursing Assistants, Physicians (MD, NP, PA), Respiratory Technicians, Group Home/Residential Staff, Pharmacists, Environmental Services Staff, Reception Staff, Home Aide/Caregiver, Corrections nurses/assistants, Congregate Care Surveyor, Hospice & palliative care staff, community health workers when acting as health aid or health translator.

YES

NO

Are you in any of the FRONTLINE essential worker categories? This population is defined by the CDC as "workers who are in sectors essential to the functioning of society and are at substantially higher risk of exposure to SARS-CoV-2." (Please check all that apply)

First Responders (Police/Fire-Including volunteer)

Correction Officers

Food & Agriculture

Manufacturing

U.S Postal Service Workers

Grocery Store Workers

Public Transit Workers

Daycare Workers

Education Sector (including teachers and support staff)

Other:



Are you any of the "Other Essential Worker" categories? (Please check all that apply)

Transportation & Logistics

Water & Wastewater

Food Service

Shelter & Housing (Construction)

Finance

IT & Communication

Media

Legal

Public Safety (Engineers)

Public Health

Other:



Do you have any of the following high risk medical conditions? (Please check all that apply) Always consult your physician for vaccine recommendations based on your personal health status.

Cancer

Chronic Kidney Disease

Chronic Lung Disease

Downs Syndrome

Heart conditions such as heart failure, coronary artery disease or cardiomyopathies

Immunocompromised state (weakened immune system) from solid organ transplant

Obesity

Pregnancy

Sickle Cell

Smoking

Type 2 Diabetes Mellitus

Other:

