

# Standard Operating Procedures

## Signature Log



### California COVID-19 Vaccination Program

Print name, sign, and date one signature block of the signature log. By signing, staff acknowledge they have reviewed the required information and are familiar with all the information in the document.

Updates & Comments					
Provider of Record		Signature		Date	
Vaccine Coordinator		Signature		Date	
Backup Vaccine Coordinator		Signature		Date	
Staff Who Updates VMP		Signature		Date	
Additional Staff		Signature		Date	
Additional Staff		Signature		Date	
Additional Staff		Signature		Date	
Updates & Comments					
Provider of Record		Signature		Date	
Vaccine Coordinator		Signature		Date	
Backup Vaccine Coordinator		Signature		Date	
Staff Who Updates VMP		Signature		Date	
Additional Staff		Signature		Date	
Additional Staff		Signature		Date	
Additional Staff		Signature		Date	
Updates & Comments					
Provider of Record		Signature		Date	
Vaccine Coordinator		Signature		Date	
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