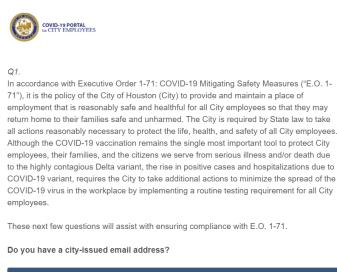
COVID-19 Portal for City Employees Submission How-to Guide

Purpose: this document will serve as a step by step guide for City of Houston employees for submitting vaccine cards, medical exemptions, and bi-monthly COVID-19 PCR test results.

Login process



Yes
Yes, I have an HPD email address
No



Brown

Last Name

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INCVE		こへに

3. Once logged in: if the employee plans on uploading their vaccination card go to step 4. If the employee plans on uploading a medical or religious exemption, go to step 9. If the employee plans on submitting COVID-19 PCR tests on the 1st and 15th of each month, go to step 12.



Q2. Respondent Information First Name Jaron Last Name Brown Q3. Which of the following apply to you?

I am fully vaccinated. You are considered fully vaccinated 2 weeks after your second dose in a two-shot series like Pfizer or Moderna vaccines, or 2 weeks after a single-dose vaccine such as Janssen (Johnson & Johnson) vaccine.

I request a medical accommodation. Click
Request for a Medical Accommodation From COVID 19 Testing rv9.22.2021 2 1.17.24 PM.pdf to download.

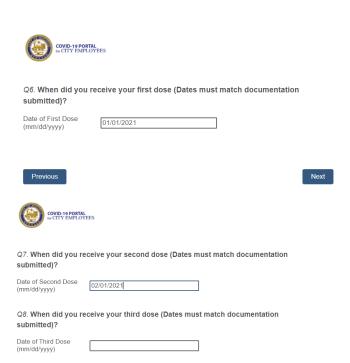
I request a **religious accommodation**. Click Request for a Religious Accommodation From COVID 19 Testing ry9.22.2021.pdf to download.

None of the above; I will upload COVID-19 diagnostic testing documentation.

Next

Q5. Which vaccine did you receive?

Pfizer-BioNTech
Moderna
Johnson & Johnson / Janssen
Mixed
Other





Q13. I, , authorize the entity or healthcare provider identified below to release my official COVID-19 immunization record from its immunization registry/records to the City of Houston.

Name of Entity or	
healthcare provider	

Q14. I, , have read and understand City of Houston's policy on COVID-19 Mitigation Safety Measures. I verify that the information I am submitting to support my request for an exemption from the testing requirements of the City of Houston's policy on COVID-19 Mitigation Safety Measures is true and accurate to the best of my knowledge. I understand that my submission to the City or use of any falsified information relating to this exemption request can lead to corrective action, up to and including an indefinite suspension or termination.



8. The employee will then receive submission confirmation and an email also confirming submission. The next correspondence will be received via email once the Human Resources Department validates the submission.



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Q2. Respondent Information First Name Last Name Q3. Which of the following apply to you? I am **fully vaccinated**. You are considered fully vaccinated 2 weeks after your second dose in a two-shot series like Pfizer or Moderna vaccines, or 2 weeks after a single-dose vaccine such as Janssen (Johnson & Johnson) vaccine. I request a medical accommodation. Click to download. I request a religious accommodation. Click Request for a Religious Accommodation From COVID 19 Testing rv9.22.2021.pdf to COVID-19 PORTAL for CITY EMPLOYEES Q9. Please upload a clear photo/image of documentation indicating you are fully vaccinated or your request for a medical and/or religious accommodation. (click the grey box again to select a new file if you accidentally uploaded the wrong file) Drop files or click here to upload Q10. I have another file to upload

11. The employee will then receive submission confirmation and an email also confirming submission. The next correspondence will be received via email once the Human Resources Department validates the submission.

Click to save uploads



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Q5. Unless exempted in accordance with Executive Order 1-71: COVID-19 Mitigating Safety Measures, City employees shall submit COVID-19 diagnostic test results on or before the 1st and 15th of every month. For any COVID-19 diagnostic test performed from the 1st through the 15th of the month, the test results shall be submitted on or before the 15th day of the same month. For any COVID-19 diagnostic test performed from the 16th to the 31st, the test results shall be submitted on or before the 1st day of the following month.

Please indicate the date your COVID-19 diagnostic test was performed below.				
COVID-19 diagnostic test performed on (mm/dd/yyyy)				
	Next			
COVID-19 PORTAL for CITY EMPLOYEES				
Q6. What was the result of your recent COVID-19 test?				
I tested POSITIVE				
I tested NEGATIVE				

Next



Q7. Please upload a clear photo/image of your test results. Note: Submission of an unclear photo/image may result in your status being reported as non-compliant.

(click the grey box again to select a new file if you accidentally uploaded the wrong file)

Drop files or click here to upload

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Click to save upload



Q8. I, Jaron Brown, have read and understand City of Houston's policy on COVID-19 Mitigation Safety Measures. I verify that the information I am submitting to support my my compliance with the testing requirements of the City of Houston's policy on COVID-19 Mitigation Safety Measures is true and accurate to the best of my knowledge. I understand that my submission to the City or use of any falsified information relating to these COVID-19 test results can lead to corrective action, up to and including an indefinite suspension or termination.



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SUBMIT