

Covid-19 Vaccination Certificate

REPUBLIC OF KENYA



MINISTRY OF HEALTH

This is to certify that _____ born on _____, from **Czechia** with **Passport:** _____ has been vaccinated against **Covid 19** on the date indicated in accordance with the National Health Regulations.

Vaccine	Dose	Date Administered	Batch No
Covishield	1	Wed Mar 24 2021	4120Z030
Covishield	2	Next Dose on Wed Jun 16 2021	Pending

Scan To Verify

