Greater Glasgow and Clyde NHS Board

**

|  |
| --- |
| *Practice details/stamp* |

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |
| Date: | [DATE] |
| Enquiries to  |  |
|  |  |
|  |  |

***PLEASE BRING THIS LETTER FOR PRESENTATION AT NHS GGC STAFF VACCINATION CLINIC***

**COVID-19 VACCINATION PROGRAMME – VACCINATion for front line staff**

**Team members name:**

**Designation:**

Please accept this letter, along with suitable photographic ID (drivers licence, passport etc) as confirmation that the above named member of the team is defined as a frontline healthcare worker and entitled to a covid-19 vaccine under the NHS GGC staff vaccination programme.

If you have any questions about this employee’s status please contact me using the contact details provided at the top of this letter.

Yours sincerely

**Practice Manager (sign and print name)**