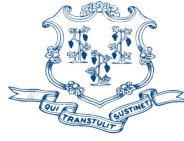


# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

Manisha Juthani, MD  
Commissioner



Ned Lamont  
Governor  
Susan Bysiewicz  
Lt. Governor

### Yellow Fever Vaccine Application

This application is for providers to request certification to administer yellow fever vaccine in the state of Connecticut. The Department of Public Health (DPH) Immunization Program will process your application and send an email when your certification has been completed.

Please fill out this application in its entirety and email it to: [DPH.Immunizations@ct.gov](mailto:DPH.Immunizations@ct.gov).

<b>Physician's License &amp; DEA number:</b>	
<b>What will the vaccine be used for? Please explain.</b>	
<b>Who will the vaccine be offered to? Type of clinic: (international traveler) or (General public) or only for the Distributors clientele or company? Please explain.</b>	
<b>Mailing Address</b> (place the yellow fever vaccine will be distributed from):	
<b>Office Telephone number:</b>	
<b>Office Fax:</b>	
<b>Office Email:</b>	
Upon certification by the DPH, three letters will be sent: 1) Provider confirming receipt and/or acceptance 2) Sanofi Pasteur 3) to Hartford Stamp Company. Please read your Yellow Fever packet at: <a href="#">Yellow Fever FAQ</a> regarding the program once certified. If you have additional questions about this form, please <a href="#">Contact Us</a>	



Phone: (860) 509-7929 • Fax: (860) 707-1925  
Telecommunications Relay Service 7-1-1  
410 Capitol Avenue, MS 11 MUN  
Hartford, Connecticut 06134-0308  
[www.ct.gov/dph](http://www.ct.gov/dph)

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Revised 3/6/23

