

## CDC COVID-19 Vaccination Program Provider Agreement and Profile

[Pandemic Providers Survey](#)

Click the link above, select "Save & Return" at the bottom of the page, enter your email address, click "Send Survey Link," and then select "Continue Survey." This will allow you to return to the beginning of the survey and make any needed revisions for your specific facility.

## Instructions for Pandemic Provider On-Boarding

1

- **Complete CDC COVID-19 Vaccination Program Provider Agreement and Profile**
  - Please complete and return as soon as possible even if signatures are incomplete.

2

- **Obtain Signatures**
  - Chief Medical Officer
  - Chief Executive/Financial Officer
  - Medical/Pharmacy Director of each facility where vaccine will be stored/administered

3

- **Complete Attachments/Uploads**
  - Upload the following documents to the CDC COVID-19 Vaccination Program Provider Agreement and Profile:
    - Digital Data Logger (DDL) Certificates for each refrigerator/freezer used to store COVID-19 vaccine
    - List of licensed facility providers who will prescribe the vaccine
      - Include provider first and last name, state license type, license number
      - Only upload information on the provided excel template. Do not alter the template in any way other than adding the requested information.

Please email questions to  
**VDPID.pandemic@tn.gov**

Helpful Resources:

[General Information on COVID-19 Vaccine](#)  
[COVID-19 Vaccination Onboarding for Healthcare Providers](#)  
[Reference PDF for Pandemic Provider Agreement and Profile](#)  
[FAQs for Completing the Provider Agreement](#)