

# Contractor Vaccination Evidence



## Declaration of Authenticity

As you are aware, BHP has introduced a requirement for COVID-19 vaccination as a condition of entry to BHP workplaces in Australia for all workers and visitors. This includes contractors and service providers.

This requirement came into effect fully from 31 January 2022.

To prepare for this requirement and help keep you and our workforce safe and healthy, BHP needs to collect and process information about your workers COVID-19 vaccination status.

By completing and submitting this document you are declaring that;

1. You have complied with all applicable laws, including data privacy laws, in collecting and providing this information to BHP.
2. You have obtained the necessary consents to collect and provide this information to BHP (and any related entity, service provider or contractor of BHP) and agree to BHP storing your workers COVID-19 vaccination data in accordance with the BHP Data Privacy Principals.
3. You have verified your workers COVID-19 vaccination status in line with the forms of evidence approved in the verification of Evidence Tab; and declare that the information in this document is true and correct and can be relied on by BHP to implement its vaccination requirement and COVID-19 controls, which are important health and safety controls.
4. Where necessary, you consent to BHP disclosing this information to related BHP entities (and relevant contractors and service providers) for the purpose of managing COVID-19 controls.
5. BHP will manage these records in accordance with privacy laws. For more about BHP privacy management practices, and about your rights in relation to information held by BHP, please see the Global Privacy Notice for BHP Workers and Our Requirements for Information Governance and Controlled Documents.

I have read and agreed to the declaration above \*

## Contracting Company

Contracting Partner Business Name \*

Vendor Number (or CRES Number) \*

Main BHP Contact or BHP Contract Owner \*

*Add Multiples if applicable*

## Contracting Partner Representative

Full Name \*

Email \*

Confirm Email Address \*

Phone \*

## Vaccination Evidence

Worker First Name \*

Worker Last Name \*

Pegasus ID \*

Worker Date of Birth \*

Which Dose are you Registering? \*

Note - If you are submitting a booster dose or additional booster dose, please also include the employees second vaccination details.

First Dose Only

Second Dose

Booster Dose

Additional Booster Dose

First Dose Date \*

Second Dose Date \*

Booster Dose Date \*

Additional Booster Date \*

First Dose Vaccine Type \*

Second Dose Vaccine Type \*

Booster Dose Vaccine Type \*

Additional Booster Vaccine Type \*

### State /Territory where vaccine was Administered

First Health Centre Code \*

Second Health Centre Code \*

Booster Health Centre Code \*

Additional Booster Health Centre Code \*

Type of Document Cited and Verified by Contracting Company \* - Click on the Verification of Evidence Tab below to see the valid evidence that can be used.

- COVID -19 Digital Certificate
- Immunisation History Statement
- International COVID-19 Certificate

Document Number \* (Is not required if using the Immunisation History Statement)

## Pegasus

Once all Mandatory \* questions have been completed, save the form as a PDF and upload into one or more of the following Competencies via the Pegasus Roles Portal to be verified by Pegasus. The same form can be used for each competency below as long as the details are included for each Vaccine.

- Mining.-. COVID - First Dose
- Mining.-. COVID - Second Dose
- Mining.-. COVID - Single Dose / Booster