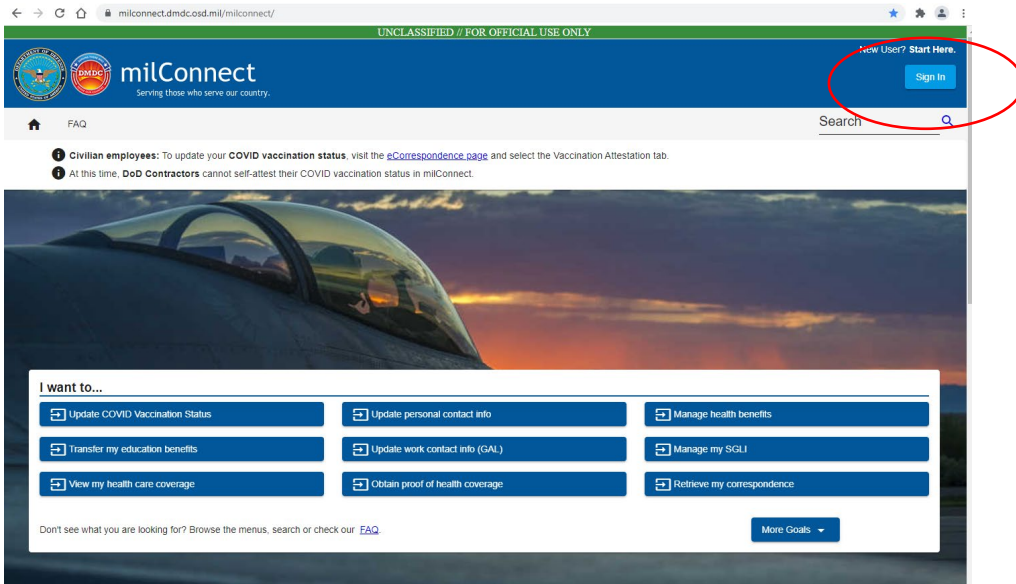


TAB B – Electronic DD Form 3175 & 3150 User Guides

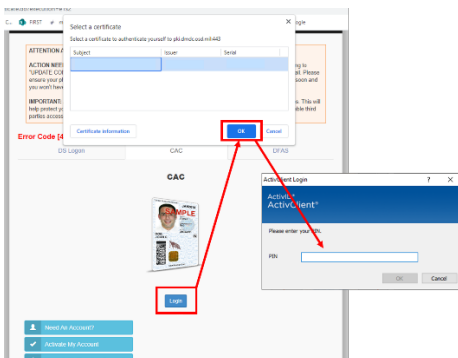
Go to <https://milconnect.dmdc.osd.mil/milconnect/> (Note: Best used in Chrome or Edge)
Select Sign In (upper right corner)



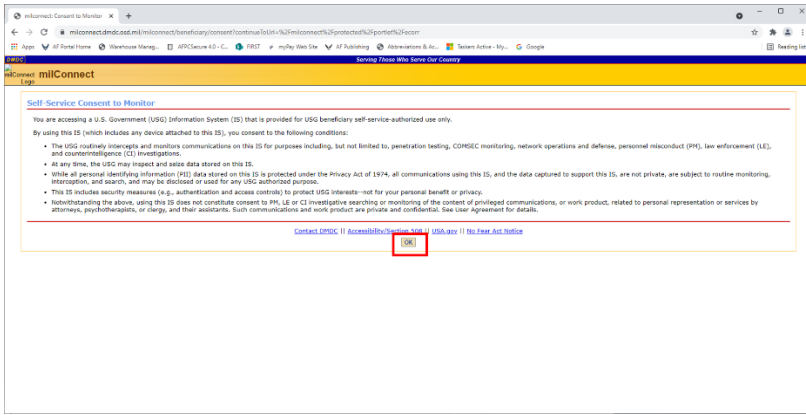
Select CAC option and login



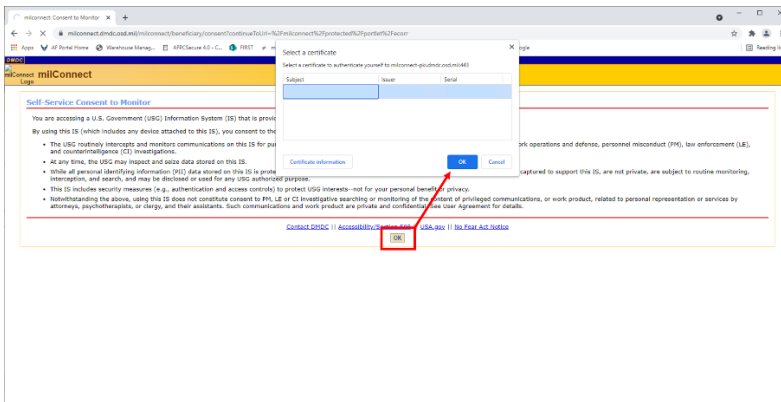
Select certificate and OK (enter PIN as prompted)



Click OK at Consent Banner

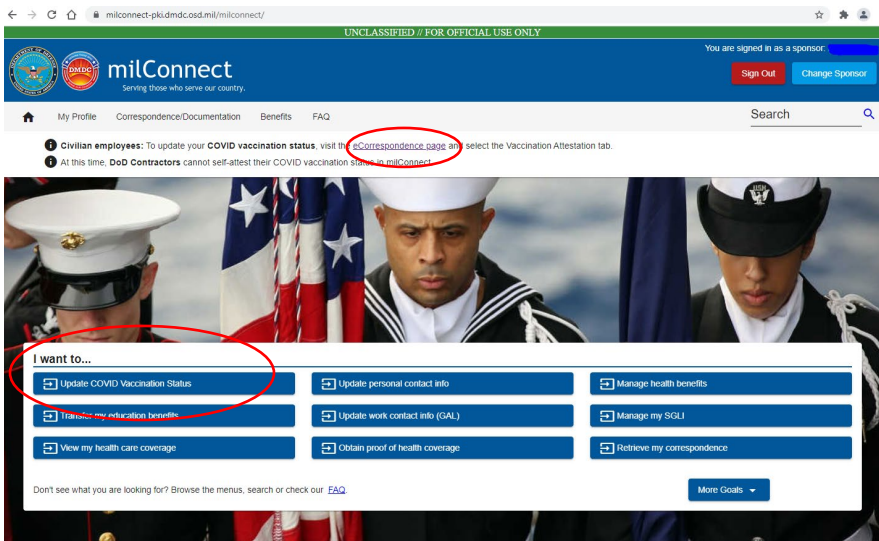


Select Certificate and Click OK



Select either the link to eCorrespondence page next to Civilian employees: or I want to Update COVID Vaccination Status

(Note: Must be signed in as a sponsor, those with dependent status must change sponsor to themselves to access the DD3175 as a civilian employee)



If 3a is selected - 3b, 3e, 3f and section 4 will become grayed out

- 3c will be available to select

INSTRUCTIONS: Section A or this form should be completed by UOJ civilian employees only. Section B or this form should be completed by the UOJ civilian employee's supervisor (or authorized human resources official). This form should be completed by UOJ civilian employees only. Service members and employees of DoD contractors should not complete this form.

SECTION A. To be completed by DoD civilian employees.

1. CIVILIAN EMPLOYEE NAME (Last, First, MI): _____ 2. CIVILIAN EMPLOYEE DOD ID NUMBER: _____

3. PLEASE CHECK ALL THAT COINCIDES WITH YOUR COVID-19 VACCINATION STATUS:

3.a. I am fully vaccinated.
Individuals are considered "fully vaccinated" two weeks after completing the second dose of a two-dose COVID-19 vaccine or two weeks after receiving a single dose of a one-dose vaccine. Accepted COVID-19 vaccines are those which have received a license or emergency use authorization from the U.S. Food and Drug Administration and those COVID-19 vaccines on the World Health Organization Emergency Use Listing. "Fully vaccinated" also includes circumstances in which the individual was a participant in a U.S. site clinical trial and has received all recommended doses.

3.b. I have received one or more doses, but I am not yet considered fully vaccinated (in accordance with the definition of fully vaccinated above).

3.c. I have submitted proof of vaccination to my supervisor.
Proof of vaccination includes a copy of the record of immunization from a health care provider or pharmacy, a copy of the COVID-19 Vaccination Record Card, a copy of medical records documenting the vaccination, a copy of immunization records from a public health or state immunization information system, or a copy of any other official documentation. Employees may provide a digital copy of such records, including, for example, a digital photograph, scanned image, or PDF of such a record that is clear and legible.

3.d. I have not received any vaccination doses.

3.e. I have submitted a request for exemption from vaccination and a decision is still pending.

3.f. I have an approved exemption from vaccination.

3. This section is only for employees that are considered partially vaccinated as defined above.

4. EMPLOYEE VACCINE INFORMATION (Employees checking block 3.a. should skip block 4 and go to block 5):

4.a. VACCINE MANUFACTURER(S) OR VACCINE PRODUCT NAME(S):

Pfizer-BioNTech/Comirnaty
 Moderna
 AstraZeneca/Oxford
 Johnson and Johnson (J&J)/Janssen
 Novavax
 Other U.S. Food and Drug Administration licensed or authorized, World Health Organization Emergency Use listed vaccine or U.S. site clinical trial vaccine (provide name): _____

4.b. DATE OF FIRST DOSE: _____

4.c. DATE OF SECOND DOSE (if two-dose vaccine): _____

4.d. DATE FULLY VACCINATED: _____

If 3b is selected Section 4 will be required

3. PLEASE CHECK ALL THAT COINCIDES WITH YOUR COVID-19 VACCINATION STATUS:

3.a. I am fully vaccinated.
Individuals are considered "fully vaccinated" two weeks after completing the second dose of a two-dose COVID-19 vaccine or two weeks after receiving a single dose of a one-dose vaccine. Accepted COVID-19 vaccines are those which have received a license or emergency use authorization from the U.S. Food and Drug Administration and those COVID-19 vaccines on the World Health Organization Emergency Use Listing. "Fully vaccinated" also includes circumstances in which the individual was a participant in a U.S. site clinical trial and has received all recommended doses.

3.b. I have received one or more doses, but I am not yet considered fully vaccinated (in accordance with the definition of fully vaccinated above).

3.c. I have submitted proof of vaccination to my supervisor.
Proof of vaccination includes a copy of the record of immunization from a health care provider or pharmacy, a copy of the COVID-19 Vaccination Record Card, a copy of medical records documenting the vaccination, a copy of immunization records from a public health or state immunization information system, or a copy of any other official documentation. Employees may provide a digital copy of such records, including, for example, a digital photograph, scanned image, or PDF of such a record that is clear and legible.

3.d. I have not received any vaccination doses.

3.e. I have submitted a request for exemption from vaccination and a decision is still pending.

3.f. I have an approved exemption from vaccination.

4. EMPLOYEE VACCINE INFORMATION (Employees checking block 3.a. should skip block 4 and go to block 5):

4.a. VACCINE MANUFACTURER(S) OR VACCINE PRODUCT NAME(S):

Pfizer-BioNTech/Comirnaty
 Moderna
 AstraZeneca/Oxford
 Johnson and Johnson (J&J)/Janssen
 Novavax
 Other U.S. Food and Drug Administration licensed or authorized, World Health Organization Emergency Use listed vaccine or U.S. site clinical trial vaccine (provide name): _____

4.b. DATE OF FIRST DOSE: _____

4.c. DATE OF SECOND DOSE (if two-dose vaccine): _____

4.d. DATE FULLY VACCINATED: _____

Other Vaccine Name: _____
Maximum of 23 characters. Only alphanumeric, dashes, and parentheses are

Once section 3 and 4 (if required) are filled out the certification in block 5 must be checked

The screenshot shows a web browser window with the URL `milconnect-pki.dmdc.osd.mil/milconnect/protected/portlet/ecorr`. The form is titled "milConnect - ECORR" and contains several sections:

- Section 3:** Three radio button options for vaccination status: 3.c (checked), 3.d, and 3.f.
- Section 4:** "EMPLOYEE VACCINE INFORMATION (Employees checking block 3.a. should skip block 4 and go to block 5):". It includes fields for vaccine manufacturer/product name, date of first dose, date of second dose (if two-dose), and date fully vaccinated.
- Section 5:** "CERTIFICATION/KNOWLEDGE OF POSSIBLE ACTIONS FOR FALSE STATEMENTS". It contains a checkbox labeled "I certify that the information I have provided on this form and the proof of vaccination documentation I have submitted is true and correct. I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both (18 U.S.C. 1001). I understand that making a false statement on this form could result in additional administrative action including an adverse personnel action up to and including removal from my position." This checkbox is checked.

A red arrow points from the text "Employees checking block 3.a. should skip block 4 and go to block 5:" to the certification checkbox in section 5.

Once certified click the Submit Status to submit

This screenshot is identical to the previous one, showing the same form with the certification checkbox checked. In this version, the "Submit Status" button at the bottom left of the form is highlighted with a red rectangular box.

Once submitted employees may print a copy of the DD3175 for their records, printing is not required if the form is completed electronically

milConnect - ECORR

milconnect-pki.dmdc.osd.mil/milconnect/protected/portlet/ecorr

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milConnect
Serving those who serve our country

You are signed in as a sponsor. [Sign Out](#)

My Profile Correspondence/Documentation Benefits FAQ

Please also note that it may take up to 24 hours for your correspondence to post to milConnect.

eCorrespondence

Review correspondence for the selected family member; choose options for a Proof of Coverage letter, or update vaccination status.

You have successfully submitted your COVID vaccination status. Remember to generate your Certification of Vaccination PDF (DD Form 3175) and email it as designated by your agency.

Correspondence Proof of Coverage **Vaccination Attestation**

COVID Vaccination Self-Attestation

CHILIAN EMPLOYEE NAME (Last, First MI): _____

CHILIAN EMPLOYEE DOD ID NUMBER: _____

VACCINATION STATUS:

- I am fully vaccinated.
- I have submitted proof of vaccination to my supervisor.

SELF-ATTESTATION SUBMISSION DATE: 2021-10-15

[Generate DD Form 3175](#) [Update Status](#)

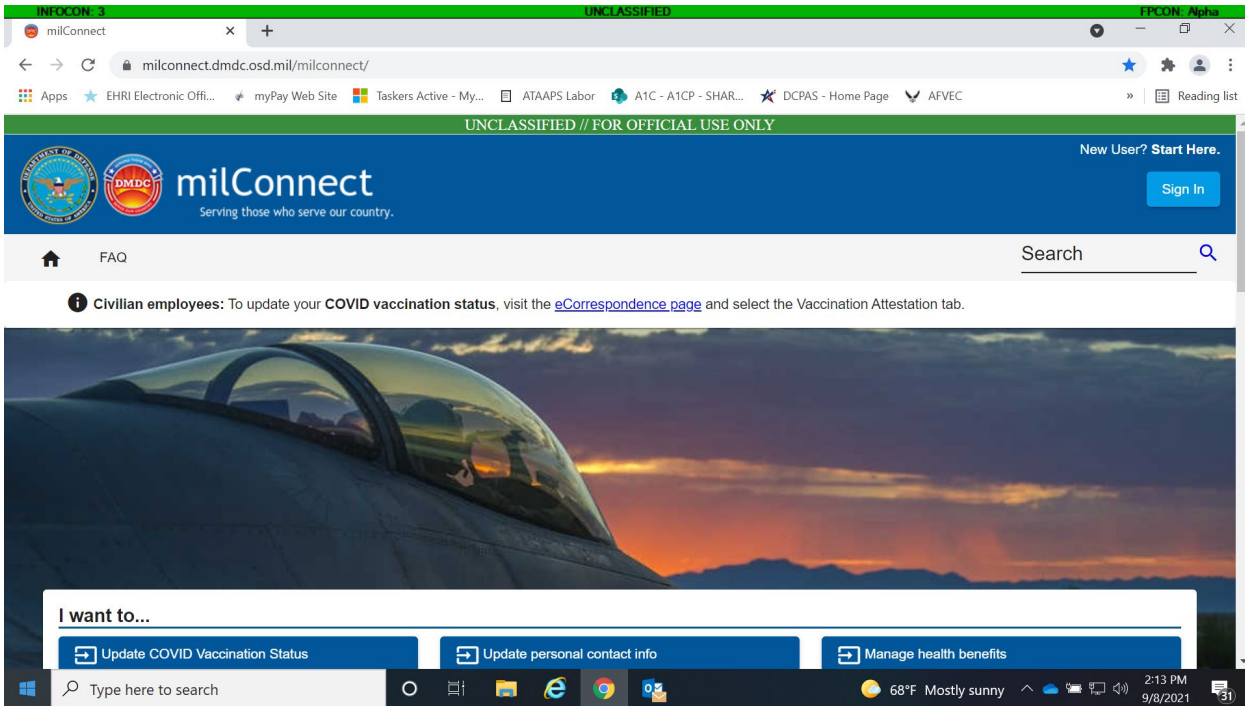
BENEFITS SUPPORT
Call the DMDCCDEERS Support Office (DSO) (800) 538-9552.

TECHNICAL SUPPORT
Call the DMDC Support Center (800) 477-8227

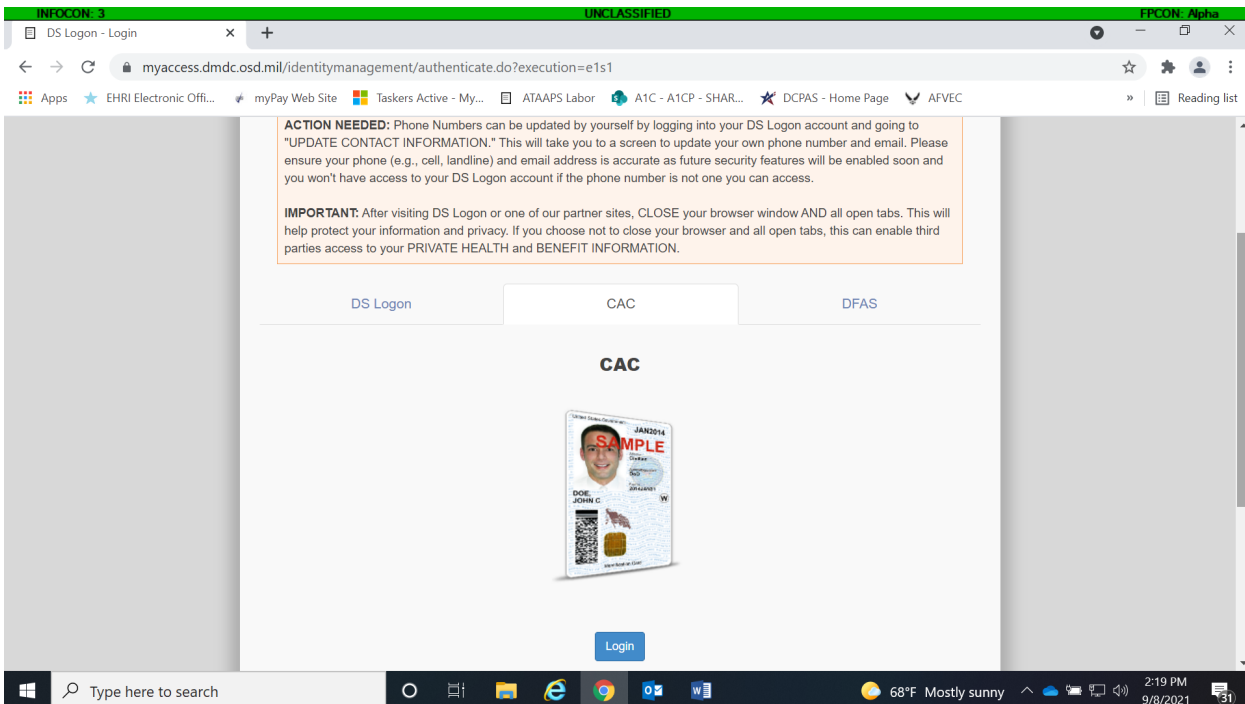
HELP
When you need fast facts about your benefits or records, check our [FAQ](#) first.

Electronic DD Form 3150 User Guide

Go to <https://milconnect.dmdc.osd.mil/milconnect/>



1. Click Update COVID Vaccination Status (Under "I want to".....)



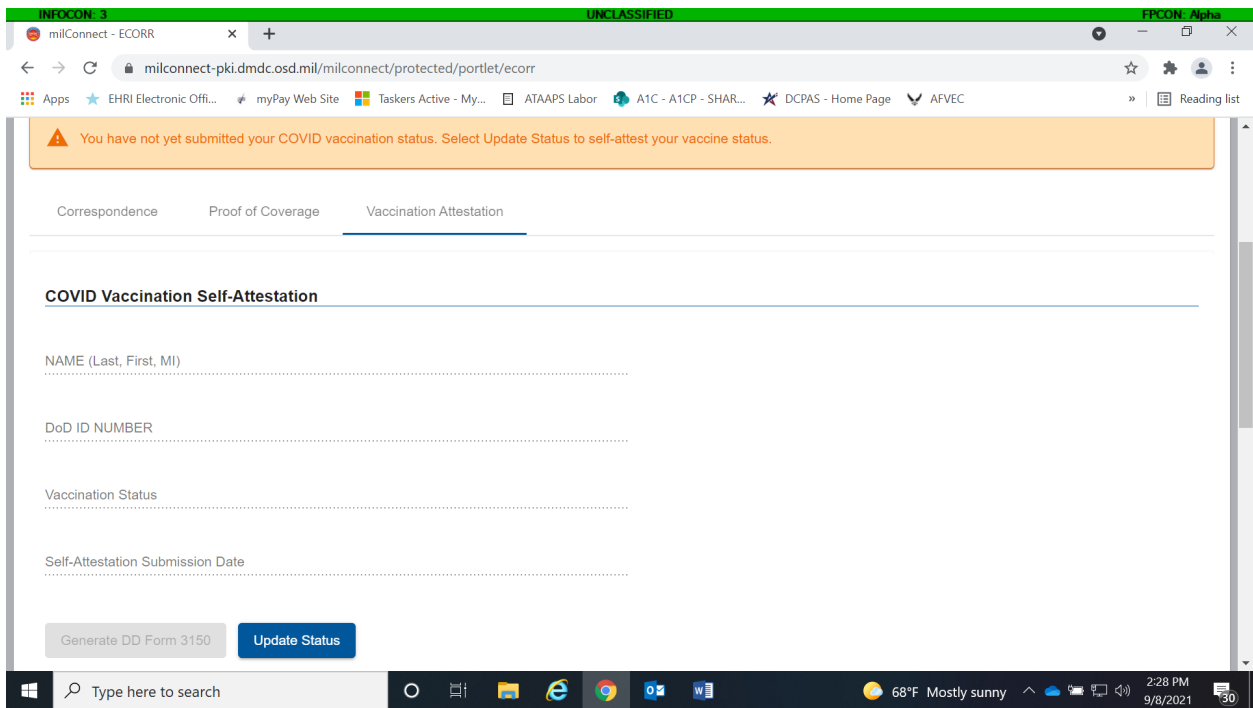
2) Select CAC, click Login, then enter pin

The screenshot shows a web browser window with the following elements:

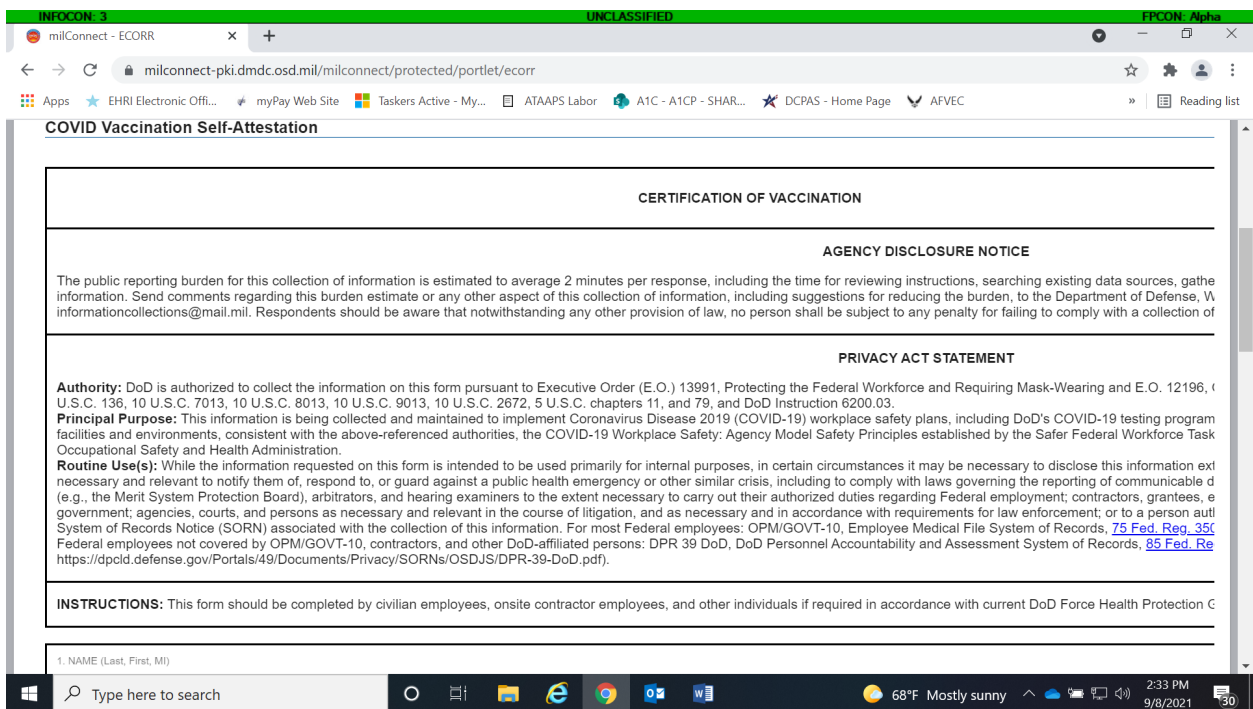
- Browser Tabs:** milconnect: Consent to Monitor
- Address Bar:** milconnect.dmdc.osd.mil/milconnect/beneficiary/consent?continueToUrl=%2Fmilconnect%2Fprotected%2Fportlet%2Fecorr
- Page Header:** INFOCON 3, UNCLASSIFIED, FPCON Alpha
- Navigation Bar:** DMDC, milConnect Logo, Serving Those Who Serve Our Country
- Section Header:** Self-Service Consent to Monitor
- Text:** You are accessing a U.S. Government (USG) Information System (IS) that is provided for USG beneficiary self-service-authorized use only. By using this IS (which includes any device attached to this IS), you consent to the following conditions:
- List of Conditions:**
 - The USG routinely intercepts and monitors communications on this IS for purposes including, but not limited to, penetration testing, COMSEC monitoring, network operations and defense, personnel misconduct (PM), law enforcement (LE), and counterintelligence (CI) investigations.
 - At any time, the USG may inspect and seize data stored on this IS.
 - While all personal identifying information (PII) data stored on this IS is protected under the Privacy Act of 1974, all communications using this IS, and the data captured to support this IS, are not private, are subject to routine monitoring, interception, and search, and may be disclosed or used for any USG authorized purpose.
 - This IS includes security measures (e.g., authentication and access controls) to protect USG interests--not for your personal benefit or privacy.
 - Notwithstanding the above, using this IS does not constitute consent to PM, LE or CI investigative searching or monitoring of the content of privileged communications, or work product, related to personal representation or services by attorneys, psychotherapists, or clergy, and their assistants. Such communications and work product are private and confidential. See User Agreement for details.
- Footer:** Contact DMDC | Accessibility/Section 508 | USA.gov | No Fear Act Notice
- Button:** OK

The Windows taskbar at the bottom shows the search bar, task view, and several application icons (File Explorer, Edge, Chrome, Teams, Word). The system tray displays the weather (68°F Mostly sunny) and the date/time (2:24 PM 9/8/2021).

3) Read Self-Service Consent and click OK



4) Tab over and select Vaccination Attestation and click Update Status



INFOCON 3 UNCLASSIFIED FPCON: Alpha

milConnect - ECORR

milconnect-pki.dmdc.osd.mil/milconnect/protected/portlet/ecorr

3. PLEASE CHECK THE BOX BELOW THAT COINCIDES WITH YOUR VACCINATION STATUS:

I am fully vaccinated. Individuals are considered "fully vaccinated" two weeks after completing the second dose of a two-dose COVID-19 vaccine (e.g., Pfizer-BioNTech or Moderna) or two

I am not yet fully vaccinated. I received my first dose of Moderna or Pfizer and my second appointment is scheduled, or I received my final dose of any vaccine less than two weeks ago.

I have not been vaccinated.

I decline to respond.

Individuals who choose not to complete the form will be assumed to be not fully vaccinated for purposes of application of the safety protocols. If you are not vaccinated due to medical or religious if you have already received one dose of a vaccine, but are not yet fully vaccinated, or if you received your final dose less than two weeks ago, then you will be treated as not fully vaccinated

I attest that the information provided in this form is accurate and true to the best of my knowledge.

I understand that a knowing and willful false statement on this form can be punished by fine or imprisonment or both (18 U.S.C. 1001). Checking "I decline to respond" does not constitute a fals administrative action including an adverse personnel action up to and including removal from my position.

4. Self-Attestation Submission Date
2021-09-08

Cancel Submit Status

Type here to search 69°F Sunny 2:43 PM 9/8/2021

5) Complete Certification of Vaccination Section 3 and click Submit Status

(Please Note: Section 1 (Name); Section 2 (DoD ID Number); and Section 4 (Self-Attestation Completion Date) will auto populate)

INFOCON 3 UNCLASSIFIED FPCON: Alpha

milConnect - ECORR

milconnect-pki.dmdc.osd.mil/milconnect/protected/portlet/ecorr

UNCLASSIFIED // FOR OFFICIAL USE ONLY

You are signed in as a sponsor: Cynthia Campbell 1

milConnect
Serving those who serve our country.

Sign Out

My Profile Correspondence/Documentation Benefits FAQ Search

Please also note that it may take up to 24 hours for your correspondence to post to milConnect.

eCorrespondence ?

Review correspondence for the selected family member, choose options for a Proof of Coverage letter, or update vaccination status.

You have successfully submitted your COVID vaccination status. Remember to generate your Certification of Vaccination PDF (DD Form 3150) and email it as designated by your agency.

Correspondence Proof of Coverage Vaccination Attestation

COVID Vaccination Self-Attestation

NAME (Last, First MI)

Type here to search 69°F Sunny 2:46 PM 9/8/2021

You should receive the following message, "You have successfully submitted your COVID vaccination status. Remember to generate your Certification of Vaccination PDF (DD Form 3150) and email it as designated by your agency."

INFOCON 3 UNCLASSIFIED FPCON Alpha

milConnect - ECORR

milconnect-pki.dmdc.osd.mil/milconnect/protected/portlet/ecorr

Vaccination Status
I am fully vaccinated.

Self-Attestation Submission Date
2021-09-08

Generate DD Form 3150 Update Status

BENEFITS SUPPORT
Call the DMDC/DEERS Support Office (DSO): **(800) 538-9552**.
Keeping your DEERS records current helps speed your TRICARE medical benefits.

TECHNICAL SUPPORT
Call the DMDC Support Center: **(800) 477-8227**.
Talk to Tech Support about the milConnect Web site.

HELP
When you need fast facts about your benefits or records, check our [FAQ](#) first.
Or search [Help](#) for quick tips on using milConnect.

CONNECT WITH US

Facebook Twitter YouTube Instagram

Type here to search 70°F Sunny 2:50 PM 9/8/2021

After initial completion/submission of the form, you can generate for download a copy of your DD Form 3150 or you can update your status at any time.