





REPUBLIC OF THE PHILIPPINES DEPARTMENT OF TRANSPORTATION



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Licensed Manning Agencies and Domestic Shipping Companies PORTAL

1. Licensed Manning Agencies (LMAs) and Domestic Shipping Companies (DSCs) to send the following details to covax@mail.marina.gov.ph for the creation of your accounts.

Complete Name of Authorized Representative/s: Name of LMA/DSC: Email Address:

- 2. Wait for the email reply for User Name and Password.
- 3. Login at
- https://seafarers-covac.marina.gov.ph/manning

Sign in to start your session Enter Email Address Enter Password
Enter Email Address Enter Password SIGN IN
Enter Password
SIGN IN

- 4. Login using the registered email address and Password provided and click SIGN IN
- 5. On the first Login please update your password. **Profile Basic Information Change Password**

Seafarers COVID-19 Vaccination				
Manning2 Indumpingmail marina gos ph	DASHBOARD TOTAL SEAFARERS 7922	For Vaccination 5342	Fully Vaccinated	First Dose 31
Dashboard	PROFILE			
n synnu (SU 30000 S	Basic Information Name: Email Address: Manning Agency Date Created: Change Password:	Name of the Authorized Sample_email@mail.m July 26.2021	d Representative arina.gov.ph	
© MARINA 2021 Marelon: 1.0.0				



Update Password

Enter New Password

Password		
Contirm P	assword	
Confirm F	assword	

Click **Save** after updating the password.

6. To view Registered Seafarer's. Click on the **Main Navigation – Registered Seafarer's.** Located on the left side area

Seafarers COVID-19 Vaccination		
User	DASHBOARD	
RICHARD Isolompitgemail.marina.gov.ph MAIN NAVIGATION	TOTAL SEAFARERS	Not Vaccinated Fully Vaccinated First Dose 25 25 23
Dashboard	PROFILE	
Registered Seafarer's	Basic Informat	tion
\sim	Name:	James O. Band
	Email Address:	james_bond@gmail.com
	Manning Agency	Solstad Offshore Crewing Services Philippines, Inc
	Date Created:	July 19,2021
	Change Password:	Update Password

7. Seafarer's View



Seafarers COVID-19 Vaccination											
Jser											
HARD mpit@mail.marina.gov.ph 🗸	View Seafarer's										
AIN NAVIGATION	Сору	CSV Exce	l PDF Print							Search:	
Dashboard	ID ₁₁	Status	First Name	Middle Name	Last Name	Suffix	Gender	Deployment	SRN Number	Option	Vaccination Card
gistered Seafarer's	10	Fully Vaccinated	James	Olsen	Bond		Male		8507170011	-	View Documents
	12	Fully Vaccinated	Pedro	Gil	Paz		Male		SRN 7001080023	ē /	View Documents
	13	Not Vaccinated	Juan	Rizal	Bonifacio		Female		C1477454	•	View Documents

Using the drop down button choose the Deployment Schedule 30, 60 or 90

				Dep	loyment			×	
	Not	hing selected		Dep	oloyment			•	
								Submit	
				Dep	loyment			×	
				Dep	oloyment				
	30								
	60 90								
Then click Subm	iit once	e finish.							
8. Seafarer's V	iew								
To print Health Forr	n								
	Cr								
Seafarers COVID-19 Vaccination									
RicHARD Isdumpitgemail.marina.gov.ph					View Seafare	('S			⊙
MAIN NAVIGATION	Copy CSV Ex	cel PDF Print						Search:	
Dashboard Registered Seafarer's	ID Status 1 10 Fully Vaccinated	First Name	Middle Name	Last Name	Suffix Ge Male	nder Deployme	ent Number 8507170011	Option Vacci	nation Card
	12 Fully Vaccinated	Pedro	Gil	Paz	Male		SRN 7001080023	tiev	v Documents
	13 Not Vaccinated	Juan	Rizəl	Bonifacio	Fema	ale	C1477454	ē View	v Documents

Sediarer's COVI	D-19 Vaccination	I Keco	<u>ra</u>	
Last Name	First Name	Mid	dle Name	e Suffix
Bond	James		Olsen	
Vaccination Site	Mobile Num	ber	SR	N Number
	0915260813	5	85	507170011
Gender	Civil Statu	Civil Status		ail Address
Male	Married		james_l	bond@gmail.com
	Home Addre	ess	-	om
brgy san roque , ml quez	on st brgy san roque vict	oria lagur	a	
Have you (or any family mer COVID-19 in the past three (nber/s) been diagnosed with 3) months?	or tested p	ositive for	Yes
Do you or have you the follow	ving symptoms in the past 14	days?		No
Fever of greater than 37.5°	c			No
Do you or have you had any past 14 days?	"flu-like" symptoms, such as	cough or cl	nills, in the	No
past 14 days:				

9. Seafarer's View

To view uploaded COVID Vaccination Card

		-6									
afarers COVID-19 Vaccination											
-											
ARD pit@mail.marina.gov.ph 🗸						View Se	afarer's				
NAVIGATION	Сору	CSV Exc	el PDF Print							Search:	
hboard	ID.	Status	First Name	Middle Name	Last Name	Suffix	Gender	Deployment	SRN Number	Cation	Vaccination Card
stered Seafarer's	10	Fully Vaccinated	James	Olsen	Bond	41	Male	41	8507170011	∂	View Documents
	12	Fully Vaccinated	Pedro	Gil	Paz		Male		SRN 7001080023	e	View Documents
	13	Not Vaccinated	Juan	Rizal	Bonifacio		Female		C1477454	8	View Documents

Seafarer's Vaccination PORTAL

1. Visit marina.gov.ph

Click the tab



And click I Agree to conform with the MARINA Data Privacy Statement

Data Privacy Statement

I understand and concur that by clicking the "I Agree to the Privacy Notice and Give my Consent", I confirm that I freely and voluntarily give consent to the collection and processing of my data, which may include personal information and/or sensitive information set out in this registration and application possessed by the Maritime Industry Authority (MARINA) for the following purposes: (a) Online COVID-19 Vaccine Profile: (b) Vaccine Program purposes; and (c) Any other vaccine activities necessary for efficient implementation of the vaccine program of the National Government.

I also confirm that I have read the Privacy Notice and give my full consent to Maritime Industry Authority (MARINA) and its affiliates as well as its partners and service providers, if any, to collect, store, access and/or process any personal data I may provide herein, such as but not limited to my name, birthdate, age, civil status, email address, applicant classification, contact number, address, gender, personal health information and Seafarer's Reference Number (SRN)/Seaman's Book Number for the period allowed under the applicable law and regulations for the MARINA's COVID-19 Vaccines Rollout Plan. I also acknowledge that the collection and processing of my personal data is necessary for such purpose. .

I am aware of my right to be informed, to access, to object, to erasure or blocking, to damages, to file a complaint, to rectify and to data portability, and I understand that there are procedures, conditions and exceptions to be complied with in order to exercise or invoke such rights.

close

Agree

2. To proceed with the Seafarer's Registration

	l CC F	Filipino Seat OVID19 Vaco Registration	farers cination Portal	
		Sign in to start your se	ession	
	÷	Enter Email Address		
	e	Enter Password		
			SIGN IN	
	Regi	ster Now!	Verification	
To reg	ister new account (click Register Now!		

Fill up all data fields and click the **Terms of Usage of this Portal**.

And then click **SIGN UP**



3. To sign in go to: <u>https://seafarers-covac.marina.gov.ph/seafarers/index.php</u>



4. Enter the registered email address and enter the password. Then click SIGN IN

5. Seafarer's Portal

Seafarers COVID-19 Vaccination		
PUser Joseph Victor Ivrogeneratogimarina.gov.ph	PROFILE	Create Health Form
MAIN NAVIGATION	Basic Information	Update Info
Dashboard	Name:	Joseph Victor Sabijon Generato
Health Form	Gender:	Male
Seafarer Record	Birth Date:	1970/01/01
	Civil Status:	
	Email Address:	jvsgenerato@marina.gov.ph
	Home Addess	·
	Manning Agency	
	Vaccination Site	
	Upload COVID19 Vaccination card if Vaccinated	Upload File

6. To update Seafarer's Basic Information click

Update Info

Joseph Victor	22/09/1977	
Middle Name	Gender	
Sabijon	Male	•
Last Name	Seafarers Reference No (SRN)	
Generato	1234567890	
Suffix	Manning Agency	
Nothing selected	Solstad Offshore Crewing Services Philippines, Inc	•
Civil Status	Mobile Number	
Married	• 09688527987	\$
Home Address	Street Address/ Barangay	
		Sa

7. To create a Health Form click the the Seafarer's Profile.

Create Health Form

located on the upper right of

Vaccination Site	Allergy	Disease/Illness	Medical History	Waiver	
re you Vaccinated? Nothing selected					•
othing selected					•

Fill up all data fields in the Health Form

Click I Understand and Agree on the Waiver

PERMISSION TO SHA	Allergy	ATION AND CONSE	Medical History	Waiver	COVID-19	
I have voluntarily pro	vided inform	ation to the Maritim	e Industry Authority r	egarding my infor	mation.	
l agree to be vaccina	ted against C	OVID-19.				
Maritime Industry Au	thority is not	responsible for any	possible side effects	I may experience	2.	
			Submit Form			
						Nex

8. To upload File for vaccination Card click.

Upload Vaccination Card Choose File No file chosen	Upload
nen click Choose File Then select the Vaccination Card picture and then click	Upload

