

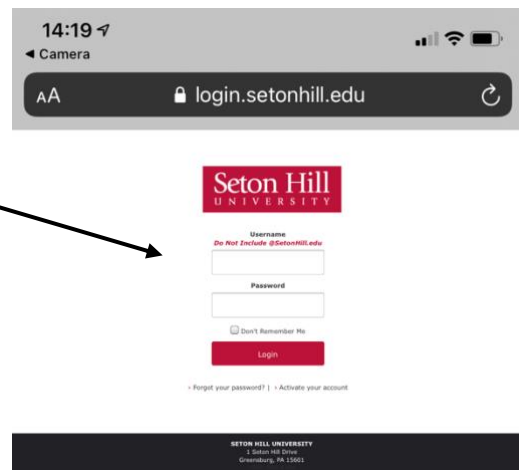


1) Please scan the QR code by using the camera on your mobile phone

OR

Please visit the website  
<https://mp.setonhill.edu>

2) You will be redirect to the Seton Hill Login page. Please login with your mySHU username and password.



14:19  
Camera  
secure.medproctor.com

Seton Hill UNIVERSITY

### Personal Contact Information

First Name \*

Middle Name

Last Name \*

Date of Birth \*  
Format mm/dd/yyyy.

Sex \*  
Select

Address 1 \*

4) Enter your Personal Contact Information.

3) After inserting your Personal Contact Information Click on the "Continue" button.

14:22  
Camera  
Reader View Available

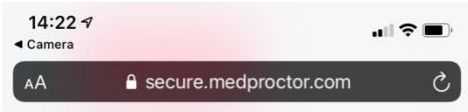
You can select someone to speak with Med+Proctor support on your behalf. Federal laws prohibit sharing your medical and educational record with anyone without your express permission. We will not be able to discuss your medical record or enrollment with the person you select. We will be able to discuss only your Med+Proctor account status with the person below.

Third Party Relationship \*  
None

Third Party Email

Continue...

Profile



## Entering Term

**Attention**  
Selecting the incorrect requirement group can significantly delay the processing of your records. For more information about selecting the right requirement group visit <https://support.medproctor.com> and search our knowledge base.

Requirement Group \*  
Select

Entering Term \*  
Select

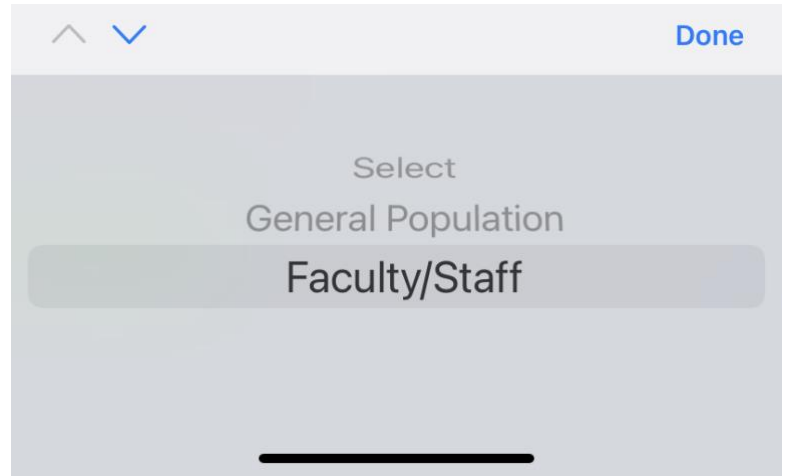
Student ID \*  
[Text Input]

Campus Resident? \*  
Select

Continue...

Profile

5) Please click on the Requirement Group dropdown and select **“Faculty and Staff”** as shown in the picture below.

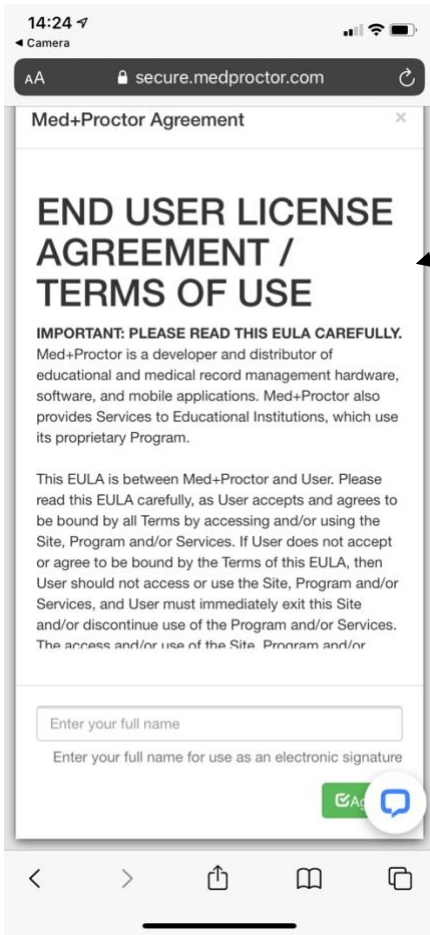


6) Please click on the Entering Term dropdown and select **“2021”**

7) Please enter your Employee ID number (it is located on the bottom right of your Seton Hill ID card)

- 8) Please click on the Campus Resident dropdown and select **“NO”**
- 9) When finished please click on the “Continue” button

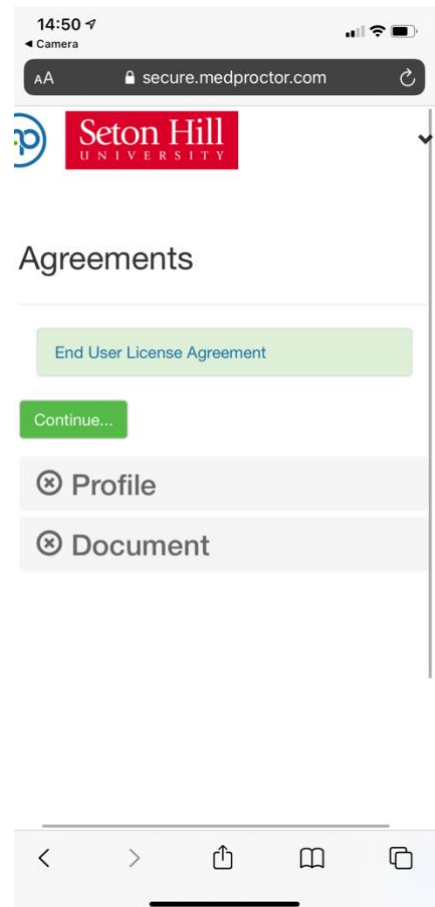




10) Please read the End User License Agreement/ Terms of Use

11) Enter your full name in the textbox  
12) When finished please click on the "Agree" button

13) Please Click the "Continue" button



PLEASE READ!

There are 2 options here:

1. Submit your immunizations with M+P Pro  
Costs \$10 and **IS NOT** required.
2. No, thank you. I do not want access to my documents later.  
Is free and can be found under the benefits table

### Ready to submit your documentation?

★ Submit your immunizations with M+P Pro!

Benefits
One-time, easy payment of \$10.00
Priority Access to support staff and verification services.
Lifetime Access: Download and use your immunization forms anytime you need them.
Centralized, Secure Storage: All of your relevant health information in one location.
Access to the Association of American Medical Colleges (AAMC) form which is accepted nationwide.
Generate your complete health record with just one click! Great for transfer of health information to other organizations.

No, thank you. I do not want access to my documents later.



## Documents

### Download Documents

Immunization Certificate

Immunization Verification Form

### Upload a Document

JPEG (.jpeg or .jpg) images are preferred.

Need to correct a document you have submitted?  
Simply select the document type and choose the corrected file in the form below.

#### Document Type \*

Select

#### Select a file \*

Choose Files no files selected

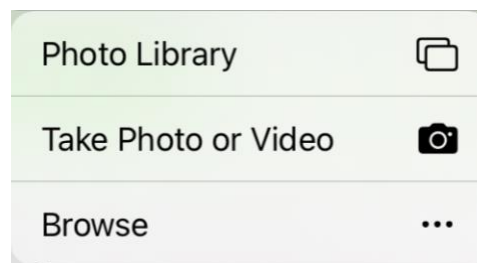
Continue...

Uploaded Documents

14) Please click on the Document Type dropdown and select COVID Vaccination.

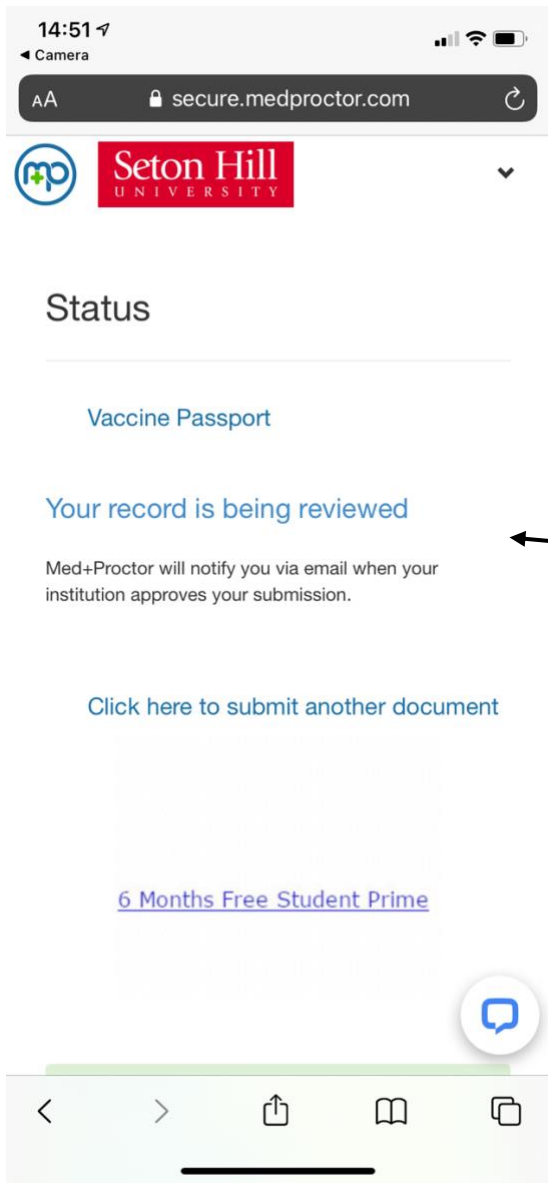
15) Click on "Choose Files"

16) You will be asked if you want upload the picture of your document by using the "Photo Library" or by "Taking a Photo"



Please select "Photo Library" if the picture is saved on your device already or select "Take Photo" if you want take a picture

17) When finished click on the "Continue" button



- 18) A confirmation Page will display that "Your record is being reviewed"
- 19) You can now close the page

