Hepatitis B Vaccine Declination (Mandatory)

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself at a reasonable time and place. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease.

If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with the hepatitis B vaccine, I can receive the vaccination at a reasonable time and place and at no charge to me.

___ I have already been vaccinated for Hepatitis B
___ I decline the vaccination at this time

________________________________________  __________________________
Signature                                            Date

________________________________________  __________________________
Witness Signature                                    Date