

Date: _____

EMPLOYEE VACCINE DECLINATION-WAIVER

| | | |
|-------------------------|---------------------|--------------------------|
| Employee Name (Printed) | S.S.N. # (optional) | E.I.D # (if available) |
| Employee E-mail Address | Employee Phone # | Employee Cell / Mobile # |

HEPATITIS B

I understand that due to my occupational exposure to blood or other body fluids, I may be at risk of becoming infected with Hepatitis B Virus (HBV). I have been given the opportunity to be vaccinated against HBV at no charge to myself. At this time I decline the HBV vaccination.

I understand that by declining the vaccine, I continue to be at risk of becoming infected with Hepatitis B, which is a serious disease. I understand that I may receive the HBV vaccination series at any time in the future while my job duties continue to present an occupational exposure risk to blood or other potentially infectious body fluids and that the vaccine will be provided at no charge to me.

| | |
|--------------------|------|
| Employee Signature | Date |
| Reviewer Signature | Date |

MEASLES –MUMPS – RUBELLA - VARICELLA

I have read the information about measles, mumps, rubella and varicella disease and the MMR and varicella vaccines, or I have had the information explained to me. I have had an opportunity to ask questions and my questions have been adequately answered.

I understand the benefits and risks of the MMR and Varicella vaccine and I understand that I can receive the vaccine at no charge to me. At this time I decline the:

MMR vaccine Varicella vaccine

I understand in doing so I may need to be restricted from work during the period of communicability if I were to be exposed to one of these viruses, in which case I would use accrued vacation or sick leave.

| | |
|--------------------|------|
| Employee Signature | Date |
| Reviewer Signature | Date |

***** Waiver does not include TB Screening. *****
You must provide records of TB Screening.

This waiver form and all records can be sent to:

Suzanne Mason, sfmason@uw.edu
Phone: 206-616-6281 / 206-685-1026
Fax: 206-221-5110 / Box 35-4410