**Hepatitis B Vaccine Consent / Declination Form**

Due to your potential occupational exposure to blood or other potentially infectious materials, you may be at risk of acquiring Hepatitis B virus (HBV) infection. The Center for Disease Control recommends that any worker at risk for exposure to contaminated blood and/or body fluids, which you may be, should be vaccinated against Hepatitis B. The City of Woodburn is providing you with the opportunity to be vaccinated with Hepatitis B vaccine at no cost to you.

**Please choose one of the following options:**

**Consent**

I consent to receiving Hepatitis B Vaccination(s) through the City of Woodburn's no-cost program.

**Declination**

I am choosing not to receive the vaccine at this time because I already received the vaccine series.

I am choosing not to receive the vaccine series at this time. I understand that by declining this vaccine, I continue to have a risk of exposure to and acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposures to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no cost to me. I am aware that if I am interested in receiving this series of shots I need to contact Human Resources for further instruction.

**Employee Signature: Date:**

**Printed Name:**

If Employee is under 18 years of age

**Parent/Guardian Signature: Date:**

**Printed Name:**