

EMPLOYEE'S REFUSAL TO TAKE HEPATITIS B VACCINATION

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. However, I decline this vaccine, and understand that 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 Hepatitis B vaccine; I can receive the vaccination series at no charge to me.

---

Signature

---

Witness

---

Employee's Personnel No.

---

Date