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### Hepatitis B Vaccination Declination Statement

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 advised of the availability of the hepatitis B vaccine. 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 hepatitis B vaccine, I can receive the vaccination series from SJSU Student Health (if I am still a student), or from my private health care provider.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature:  Date: 2-14-2019

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