

## EMS University Hepatitis B Declination

I understand that due to my risk of exposure to blood or other potentially infectious materials I could potentially acquire the Hepatitis B Virus (HBV) infection. I have been given the opportunity to be vaccinated with the Hepatitis B Vaccine prior to admission into the program.

Additionally, I understand that enrollment in this program is optional and that although it is recommended to obtain or otherwise receive the Hepatits B vaccine, I hereby decline the Hepatitis B vaccination at this time. I understand that by declining this vaccine, I am at risk of acquiring hepatitis B, a serious disease.

I hereby indemnify and hold harmless EMS University and its employees relating to my choice to not receive the vaccination. If in the future, I want to be vaccinated with Hepatitis B vaccine, I have the option to do so, but shall pay for the vaccination myself.

Dated:		
Name of Student:	 	 
Signature:		