



CANDIDATE IMMUNIZATIONS DECLINATION

VARICELLA IMMUNITY

I, the undersigned, have had the Chicken Pox in the past and decline the Varicella Vaccine/Titer at this time.

Chicken Pox: _____ at age: _____ year: _____

MEASLES, MUMPS (RUBEOLA), AND RUBELLA IMMUNITY (MMR)

My vaccination records show immunity to Rubella and Rubeola, therefore I decline the immunization at this time

HEPATITIS B VACCINATION DECLINATION

The Bloodborne Pathogen Standards require the employer to ensure that employees who decline to accept the Hepatitis-B vaccination sign the following statement.

I, the undersigned, understand that due to my occupational exposure to blood or other potentially infectious materials that I may be at risk of acquiring hepatitis B virus (HBV) infection. 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, and I reserve the right to be vaccinated at a future date if my circumstances change.

Signed: _____

Date: _____

Print Name: _____

PLEASE NOTE:

Signature of this document will not be sufficient if our client requires proof of vaccinations or titer results.

Please return this form to:

Credentials@MissionSearchUSA.com or by fax at 813-870-9051