

**[INSERT] VACCINATION  
ACCEPTANCE/DECLINATION STATEMENT**

Instructions:

This form should be used for vaccinations that may be applicable to agents being utilized in work or projects that do not involve human blood or blood products. If using human blood or blood products, please use the Hepatitis C-specific vaccination acceptance/declination form.

Please save this form in accordance with DePaul University's records retention policies. In addition, if this form is being used for Institutional Biosafety Committee purposes, please send the completed form to the IBC along with your protocol submission materials.

Check *one* of the following:

I have received the **[INSERT]** vaccination **[OPTIONAL series]** on: \_\_\_\_\_  
Date

I decline participation in the vaccination **[OPTIONAL series]**.  
I understand that due to my exposure to potentially infectious materials, I may be at risk of acquiring the **[INSERT]** infection. I acknowledge that I have been provided with the following information regarding the infection and the vaccine: **[INSERT]**.

I have been given the opportunity to be vaccinated with the **[INSERT]** vaccination at this time. I understand that by declining this vaccination, I continue to be at risk of acquiring **[INSERT]**.

If, in the future, I continue to have exposure to potentially infectious materials and I wish to be offered the **[INSERT]** vaccine, I can be vaccinated at that time at no charge to me.

I accept participation in the vaccination program and wish to receive the vaccination **[OPTIONAL series]**.

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Print name	Signature
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DePaul ID #	Department
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Supervisor (for employees)	Date
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