

**University of Maine at Presque Isle  
Athletic Training Program  
Hepatitis B Vaccine Declination**

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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 seek vaccination through a provider at the University of Maine at Presque Isle. 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 through a provider at the University of Maine at Presque Isle.

**Name:**

**SS #:**

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Signature

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Date