

**THE UNIVERSITY OF NORTH
CAROLINA at GREENSBORO**

**ACKNOWLEDGMENT OF INITIAL
TRAINING AND ACCEPTANCE OF
HBV VACCINE**

I hereby acknowledge that I have been informed of my risk of occupational exposure to blood and other potentially infectious materials in my job.

My employer has provided me with training on these risks, how they may be minimized, and made available personal protective equipment to me at no charge.

I have reviewed a copy of the Exposure Control Plan, and have received written instructions on procedures to follow should I have an exposure incident with blood or other potentially infectious materials, and hereby agree to comply with facility policies in these and other matters.

Due to the possibility of exposure to hepatitis B, a serious disease, my employer has made available (at no cost to me), a vaccination for this disease. I agree to take this vaccine series and provide my employer with evidence of vaccination. I will follow facility policy for getting the vaccine.

The above training and offering of the hepatitis B vaccine has taken place within 10 days of my initial assignment.

Signature of Employee: _____ Date: _____

Signature of Supervisor: _____ Date: _____

cc: Office of Safety, Departmental Personnel File
