

AUTHORIZATION FOR HEPATITIS B VACCINATION

Section I: Employee Instructions

You have been authorized to receive the hepatitis B vaccination series. The vaccine is administered through the Occupational Health Clinic at Kaiser Permanente in Rohnert Park or through the Sonoma State University Student Health Center.

Please contact the Occupational Health Clinic at Kaiser Permanente, Rohnert Park by calling (707) 206-3116 or the Sonoma State University Student Health Center by calling Carolyn Montgomery at (707) 664-2921. Upon your request, you will be provided with a completed copy of the Authorization for Hepatitis B Vaccination Form after your vaccination. A copy will also be provided to Human Resources – Medical Monitoring Coordinator.

Please take this form with you to your scheduled appointment.

Employee Name: _____

Department: _____ Position: _____

Supervisor: _____

Employee Signature: _____ Date: _____

Section II: Human Resources – Medical Monitoring Coordinator Authorization

Name: _____ Date: _____

Section III: Occupational Health Clinic @ Kaiser or SSU Student Health Center

Vaccination Dates:

1. Date: _____

2. Date: _____

3. Date: _____

Vaccination Complete: Yes No

If “No” please explain: