University of Wisconsin-La Crosse Athletic Training Program Declination of Immunization Information & Immunization Responsibilities Form

<u>Declination of Immunization:</u> We respect that a student may elect to not receive all immunizations for personal or medical reasons. Students who have a medical condition that precludes them from receiving immunization(s) may be asked to provide additional documentation from a medical provider. Clinical sites affiliated with the UWL Athletic Training Program must comply with their organization's policy regarding immunizations and as such may decline a student without required immunizations or medical documentation. Students should be aware that this may impact options for clinical education experiences and progression through the Athletic Training Program.

Check the box next to the statement that applies to you:

- □ No, I have not declined or will not decline immunizations for personal or medical reasons.
- Yes, I have declined or will decline immunizations for personal or medical reasons. I understand that I may be asked to provide additional documentation from a medical provider if I have not or will not receive immunizations for medical reasons. I also understand that my declination of immunization may have an effect on my clinical education opportunities.

I decline the following immunizations:

- □ Hepatitis B
- □ MMR
- D Polio
- □ Tetanus/Diptheria/Pertussis
- D Varicella
- □ COVID-19
- □ Influenza

It is the responsibility of the student to retain immunization records, titer results/lab reports, and TB test results.

Sign and date below to verify that you have read and understand the declination of immunization information and responsibilities described above.

Student Name (printed)

Date

Student Name (signature)