



Declination of Influenza Vaccination (seasonal flu vaccine)

Samuel Merritt University has recommended that I receive influenza vaccination in order to protect myself and the patients that I care for.

I have received, read, and understand information concerning the risks and benefits of the vaccine. I acknowledge that California SB 739 requires all healthcare workers (including nursing students) to receive a flu vaccination or sign a declination letter.

I decline the influenza vaccine at this time. However, I understand that I may change my mind at any time and accept the influenza vaccination, if vaccine is available.

Student Name (Print)

Student Signature

Date