CHIMACUM SCHOOL DISTRICT

"CREATING THE FUTURE TODAY"

P O Box 278 Chimacum WA 98325-0278

Phone: (360) 302-58		A 98325-0278	FAX: (360)732-4336
	<u>Hepatitis B Vac</u>	cination Record	
Employee's Name		Job Title:	
Department/Location:			
Hepatitis B Va	ccination Series:		
Vaccination #1	Given by:		Date
Vaccination #2 One month after #1	Given by:		Date
Vaccination #3 Five months after #2	Given by:		Date
Employee Signature:			Date: