

**Place, Operations and
Sustainability**

Service Manager:

Enter name and address ONLY in this area
and do not exceed 6 lines

Date: [Click here to enter a date.](#)

Dear **EMPLOYEE NAME**

I am writing to formally confirm that you have declined the offer of vaccination provided by New Forest District Council to protect again (**name of Infectious disease or BBV**). Task specific risk assessments have been undertaken and identified that you may be exposed to (**name of infectious disease or BBV**) during the course of your work with New Forest District Council.

This vaccination was offered as part of our commitment to ensuring a safe and health working environment, in accordance with our obligations under health and safety legislation and occupational health best practices.

You have been informed of the potential risks associated with exposure to such infections in your role, as well as the benefits of receiving the recommended vaccinations.

Please note that your decision has been recorded, and we will continue to take all reasonable steps to minimise your risk of exposure through other control measures outlined within task specific risk assessments and method statements.

Should you change your mind in the future, please do not hesitate to contact your supervisor.

We ask that you sign and return a copy of this letter to confirm your understanding and acknowledgement of the above.

Employee Name:

Employee Signature:

Date:

Kind regards

Name
Job Title
Section/Service
Tel No:
email: