

## Immunization and Practicum Disclosure Waiver Form

To participate in the practicum component of your program, you must meet the immunization standards established for health care workers for your Health Authority and clinical facility. A complete immunization record is an admission requirement to ensure these standards have been met.

I am aware that there are practicum courses in the program.

I understand that:

- Submission of a complete immunization record will be required before I will be able to participate in any practicum courses.
- Submission of a complete immunization record is a requirement of most Health Authorities and clinical facilities hosting NWP students. Health Authority/clinical facility may decline practicum placement or remove students from a placement site if immunization requirements are not met.

I understand that not providing a complete immunization record:

- May prevent me from participating in the practicum course in the program.
- May prevent me from meeting program requirements and thus completing the program.

I understand that, if I am denied access to a practicum site by a health service organization for immunization reasons, NWP will be unable to provide practicum courses that are required to complete the program and I may be withdrawn from the program.

I understand that if I am withdrawn from the program:

- My academic transcript will show that I withdrew from the course. This means that I will not meet the progression criteria to continue in the program.
- Any refund of tuition will be subject to the tuition refund policy at NWP.

Please initial the following:

\_\_\_\_\_ YES, I have read & understand the requirements for immunization in the program.

\_\_\_\_\_ YES, I do understand the implications if I choose not to meet the program immunization requirements.

Program

BScN

Practical Nurse

Health Care Aide

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\_\_\_\_\_

Student Name

Signature

Date