

Ventura County Community College District

Medical Evaluation Consent

A. I consent to allowing both a baseline blood sample collection and serological testing of the sample:

B. I consent to allowing a baseline blood sample collection, but NOT to serological testing of the sample at this time. I understand the blood sample will be preserved for at least 90 days. I can request a serological test of the sample at any time within the 90 day period, but understand I must give an additional blood sample to document seroconversion.

C. I do not consent to allowing either a baseline blood sample collection or serological testing.

Name: _____

Signature: _____ Date: _____

Source Individual Testing

Check one of the following

A. Source has agreed to be tested.

B. Source has refused to be tested.

C. Source cannot be found or identified.

Name: _____

Signature: _____ Date: _____