

Request for Religious Accommodation/Exemption Form

Re	equesting Party: Email:		
Em	mployee: Student:		
Po	osition:		
Su	upervisor: Email:		
De	Department/Program:		
Ple	lease respond to the following:		
	. Please provide your reason for requesting an accommodation/exemption based on a sincerely held religi	ous belief	
2.	. Describe how your sincerely held religious belief(s) limits your ability to perform the essential functions of or a university required function or activity.	your job	
3.	. Please use your job description or other information to identify how essential functions of your job or othe university requirements are impacted by your sincerely held religious belief(s).	er	
4.	. List and describe the accommodation(s) or exemption(s) you are proposing.		
5.	. Explain how the proposed accommodation(s) or exemption(s) will enable you to perform the essential fun- your job or university required function or activity.	ctions of	
6.	. Please add any comments or information you believe may be helpful in consideration of your request.		
Re	equesting Party's Signature: Date:		