



**COVID-19 Vaccine Religious
Accommodation Request Form
-Confidential-**

This form relates to your request for an accommodation/exemption from the University's COVID-19 vaccination requirement. Requiring vaccination against COVID-19 complies with the executive order relating to employers who serve as federal contractors and demonstrates our commitment to protect the safety and health of our students, employees, and the University community. Individuals requesting a religious accommodation must complete this form per the instructions below.

- You must complete this form and provide supporting documentation as requested.
- You must then submit the completed request form to Human Resources at hrbp@memphis.edu.
- Upon review of the completed form and documentation, you will be notified of the decision regarding your requested accommodation.
- The University may require you to reapply for approved accommodation(s) annually.

RELIGIOUS ACCOMMODATION REQUEST

The University prohibits discrimination on the basis of religion and promotes diversity and inclusion for all members of the UofM Community as part of its commitment to equal employment and educational opportunities. If your sincerely held religious beliefs or practices conflict with the COVID-19 vaccination requirement, please complete the following information and return it to Human Resources at hrbp@memphis.edu.

Name: _____ Banner ID: _____

Department: _____ Email: _____ Date of Request: _____

Please explain why you are seeking a religious accommodation (use space below and additional sheet(s) as needed).

In some cases, the University will request documentation or other authority of your religious practice(s) or belief(s). The University may need to discuss the nature of your religious belief(s), practice(s), and accommodation with your spiritual leader (if applicable) or religious scholars to address your request for an accommodation.

I verify that the above information is complete and accurate, and I understand that any intentional misrepresentation contained in this request may result in disciplinary action. I also understand that my request for an accommodation may not be granted if it is not reasonable or if it creates an undue hardship.

Signature _____ Date _____

FOR HUMAN RESOURCES ONLY

Date Received: _____ Religious Accommodation approved? Yes _____ No _____

Signature of HRBP processing request: _____ Date approved/denied: _____

Conditions of approval (if any):

Reason denied (if applicable):