RELIGIOUS ACCOMMODATION REQUEST FORM FOR COVID-19 VACCINATION

The Gavilan Joint Community College District affords equal employment opportunity for all qualified employees and applicants as to all terms of employment and prohibits discrimination against employees or applicants based on classifications protected by law, including, but not limited to, religion, creed, and religious belief, practice, or observance. Accordingly, the District provides reasonable accommodations for applicants, employees, volunteers, and students whose sincerely held religious belief, practice, or observance conflicts with an employment requirement, unless providing a reasonable accommodation would result in undue hardship on the conduct of the District's operations.

To promote a safe and healthful workplace for employees, and to promote the health and safety of students, volunteers, and employees working and learning on the District's campus and facilities, and members of the community, the District requires that all students, volunteers, and employees be fully COVID-19 vaccinated by November 15, 2021. Employees, volunteers, and students may use this form to request a religious accommodation if they have a sincerely held religious belief, practice, or observance that conflicts with the District's requirement that all students, volunteers, and employees receive a COVID-19 vaccination.

Employee to complete the following information:

Section A: General Information

Employee's/Student's/ Vo	lunteer's Name:
Employee's/Student's Gav	vilan ID Number:
Employee's Job Title:	
Employee's Supervisor:	
Employee's Department:	
Employee's Worksite:	

Section B: General Position and Worksite Information

Please check all that currently apply to you:

- ☐ I am a District student engaged in learning on-campus
- ☐ I perform work onsite at a District campus or facility
- ☐ I interact with students, other employees, visitors, or members of the public while performing my job or volunteer duties

□ I perform work in shared or communal spaces or areas where students, other employees, visitors, or members of the public may also be present Section C: Description of Religious Belief, Practice, or Observance Please describe your sincerely held religious belief(s), practice(s), or observance(s) that conflicts with the requirement that you receive a COVID-19 vaccination: <u>Section D</u>: When did you embrace the belief, observance, or practice? <u>Section E</u>: When and where have you adhered to the belief, observance, or practice? <u>Section F</u>: How have you adhered to the belief, observance, or practice?

<u>Section G</u> : What nature and tenets of your religious beliefs require you not to become vaccinated against Covid-19?
<u>Section H</u> : What associated practices, rituals, or observances require you not to become vaccinated against Covid-19?
Section I: Requested Accommodation
Please describe the accommodation* you are requesting:**

 $^{{\}bf *Please\ note\ that\ an\ accommodation\ must\ enable\ you\ to\ meet\ the\ essential\ functions\ of\ your\ job.}$

^{**} Please note that the District will consider your preferred accommodation and other possible accommodations that would resolve the conflict between your religious belief(s), practice(s), or observance(s) and will select and implement the accommodation that it deems effective, which may include, but is not limited to: (1) job restructuring or job reassignment; (2) modification of work practices; (3) alteration to worksite location; and (4) personal protective equipment, such as wearing a face covering while on District premises.

My signature below indicates that the information I have	1
my sincerely held religious belief(s), practice(s), or or	observance(s) and its conflict with the
District's requirement that all students, volunteers,	and employees receive a COVID-19
vaccination. I also understand that in evaluating my rec	quest for an accommodation, the District
may require me to provide additional supporting docume	entation and may not grant my request if
it creates an undue hardship on the conduct of the Distric	et's operations.
Employee's, Volunteer's or Student's Signature	Date