



RELIGIOUS EXEMPTION REQUEST FORM

The Edmonds College will provide reasonable accommodations to qualified applicants and employees with religious beliefs, unless providing such accommodations would pose an undue hardship.

Instructions for employees:

Please return this form and your response to casey.king@email.edcc.edu. Please complete your response no later than **October 1, 2021** to help us assure timelines for response can be met. To avoid delay, please feel free to electronically transmit your response through secure email transmittal. If you have any questions or need more information, please do not hesitate to contact Casey King at casey.king@email.edcc.edu.

Questionnaire:

Employee name _____

1. You, _____ [name], assert that you have a sincerely held religious belief or religious conviction that prevents you from receiving the COVID-19 vaccine. YES NO

2. You, _____ [name] affirm/agree that you have never received a vaccine from a health care provider as an adult. YES NO

In some circumstances, Edmonds College may need to obtain additional follow up information about your sincerely held religious belief(s). Edmonds College will reach out to you if additional information is needed to process this request.

I certify that I have read and understood the information provided in this request, and that it is true to the best of my knowledge, information and belief.

Employee Signature

DATE