

Request for Religious Exemption/Accommodation for COVID-19 Protocols

Middle Tennessee State University (“MTSU”) has instituted protocols designed to mitigate the spread of the COVID-19 virus consistent with guidance from the Centers for Disease Control (CDC). In order to ensure the health and safety of the MTSU campus community, all community members are expected to comply with these protocols.

MTSU is also committed to providing equal opportunities without regard to any protected status and an environment that is free of unlawful harassment, discrimination, and retaliation. As such, MTSU is committed to complying with all laws protecting religious beliefs and practices. When requested, MTSU will engage in an exemption/reasonable accommodation process for religious beliefs and practices which prohibit the individual from following a COVID-19 protocol.

To request an Exemption/Accommodation related to MTSU’s COVID-19 protocols, please complete this form and return it to Institutional Equity & Compliance (“IEC”). This information will be used by IEC or other appropriate personnel to engage in an interactive process to determine eligibility for and to identify possible accommodations. If an individual refuses to provide such information, their refusal may impact MTSU’s ability to adequately understand the individual’s request or effectively engage in the interactive process to identify possible accommodations.

Part 1 - To Be Completed by Person Making Request:

Name: _____

Email: _____

Phone: _____

Date of Request: _____

Please explain below why you are requesting an Exemption/Accommodation including a description of the specific protocols from which you wish to be exempted:

Please identify the religious beliefs that you believe will be burdened if you are required to comply with these protocols:

For each religious belief identified above, please explain how long you have held that religious belief and provide examples of other circumstances where you have practiced it.

Verification and Accuracy

I verify that the information I am submitting in support of my request for an accommodation is complete and accurate to the best of my knowledge, and I understand that any intentional misrepresentation contained in this request may result in disciplinary action.

THIS FORM MUST BE SIGNED BEFORE A NOTARY.

Signature: _____

Print Name: _____

Date: _____

Sworn and subscribed before me this _____ day of _____ 20 _____

Notary Signature _____

Commission expires _____

NOTARY SEAL

Part 2 - To be completed by IEC Representative:

Date this Request Form Received in IEC: _____

Interactive Discussion Date(s) if applicable: _____

Exemption/Accommodation granted? _____ Yes _____ No

Describe Exemption/Accommodation:

