



Request for Religious Exemption Related to COVID-19 Vaccine

The Lincoln County School District is committed to providing equal employment opportunities without regard to any protected status and a work environment that is free of unlawful harassment, discrimination, and retaliation. As such, the Lincoln County School District is committed to complying with all laws protecting employees' religious beliefs and practices. When requested, the Lincoln County School District will provide an exemption for employees' religious beliefs and practices which prohibit the employee from receiving a COVID-19 vaccine.

To request an exemption, please complete this form and return it to Human Resources. This information will be used by Human Resources and/or other appropriate personnel to engage in an interactive process to determine eligibility. If an employee refuses to provide such information, the employee's refusal may impact the Lincoln County School District's ability to adequately understand the employee's request or effectively engage in the interactive process to identify possible exemption.



Request for Religious Exemption Related to COVID-19 Vaccine Form

Name: _____

Date of Request: _____

Please explain below why you are requesting an exemption:

In some cases, the Lincoln County School District may need to obtain additional information and/or documentation about your religious practice(s) or belief(s). We may need to discuss the nature of your religious belief(s), practice(s) and exemption with your religion's spiritual leader (if applicable) or religious scholars to address your request for an exemption.

If requested, can you provide documentation to support your belief(s) and need for an accommodation? Yes No

If no, please explain why:

Verification and Accuracy

I verify that the information I am submitting in support of my request for an exemption 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. I also understand that my request for an exemption may not be granted.

Printed Name: _____

Signature: _____

Date: _____