

WASHINGTON STATE UNIVERSITY
RELIGIOUS EXEMPTION REQUEST FORM – WSU Extension Volunteers
PROCLAMATION 21-14.1 (COVID-19 VACCINE REQUIREMENT)

Washington State University will attempt to provide reasonable accommodations to qualified volunteers with sincerely held religious beliefs, practice, or observance that conflict with volunteer role requirements, unless providing such accommodations would pose an undue hardship.

Instruction for Extension Volunteers requesting consideration for religious accommodation:

To initiate a request for consideration for religious accommodation for volunteers through the WSU Extension process, please read the following and fully complete the questionnaire below.

Claiming an exemption/accommodation based on false, misleading, or dishonest information is grounds for disciplinary action up to and including termination from employment. Below are initial intake questions for you to respond to in requesting a sincerely held religious belief, practice, or observance exception pursuant to Proclamation 21-14.1.

Complete and return to WSU Extension, PO Box 646242, Pullman, WA 99164-6242, FAX 509-335-1065, or extension.vaccine.exemption@wsu.edu. This form must be submitted at least one month prior to the date the volunteer would like to be in active status.

Questionnaire:

1. VolunteerName County

Program
2. Describe the sincerely held religious belief, practice, or observance that is the basis for your request for a religious exemption/accommodation to WSU's COVID-19 vaccination requirement.
3. Briefly explain how your sincerely held religious belief, practice, or observance conflicts with WSU's COVID-19 vaccination requirement.

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4. How long have you held the above religious belief, practice, or observance?

5. If you have ever received a FDA authorized or approved vaccine at any time in your life, please explain how your sincerely held religious belief, practice, or observance causes you to object to the COVID-19 vaccine compared to other vaccines you received.

6. If the request for accommodation is temporary, please identify the anticipated date the accommodation is no longer needed:

Washington State University may need to obtain additional follow up information about your strong held religious belief(s) and/or discuss reasonable accommodations to WSU’s COVID-19 vaccination requirement. WSU will reach out to you if additional information is needed to process this request.

I certify that I have read and understand the information provided in this request, and that I have truthfully completed it based on my knowledge, information, and belief. I understand that it is illegal to claim an exemption/accommodation on false, misleading, or dishonest grounds, including by providing false, misleading, or dishonest information when seeking an exemption/accommodation, and that any violations will be subject to appropriate legal enforcement and/or discipline.

Volunteer Signature

Date