

**Request for Accommodation: Religious Exemption**

**Section 1**

Name (print):	Date:
School District:	Title:
Address:	Work/Cell Phone:

I wish to attend the:  2021 Fall Conference  2021 Midwest Facility Masters Conference

I am requesting a religious accommodation for WASBO's 2021 Conference vaccination policy for the following vaccination):

COVID-19 Vaccine

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Length of time the accommodation is needed: \_\_\_\_\_

An exemption from the vaccination requirement may be granted for a sincerely held religious belief, practice, or observance which prevents you from taking the influenza vaccine. Please describe the religious belief or practice that necessitates this request for accommodation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I have read and understand WASBO's policy on religious accommodation. My religious beliefs and practices, which result in this request for a religious accommodation, are sincerely held. I understand that the accommodation requested above may not be granted but that WASBO will attempt to provide a reasonable accommodation that does not create an undue hardship for the association. I understand that WASBO may need to obtain supporting documentation regarding my religious practice and beliefs to further evaluate my request for a religious accommodation and may ask for additional information in order to clarify the basis for and to evaluate this request.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**WASBO USE ONLY** Date of initial

request: \_\_/\_\_/\_\_

Date certification received: \_\_/\_\_/\_\_

Accommodation request:

Approved \_\_/\_\_/\_\_

Describe specific accommodation details:

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Denied \_\_/\_\_/\_\_

Describe why accommodation is denied:

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*\*Please note that if an accommodation is denied, the registration cancellation fee will be waived.*