

**STUDENT Request for Accommodation
Religious Exemption from COVID-19 Vaccine**

To request a religious exemption from Queens University's mandatory COVID-19 vaccine requirement, please complete Section 1 below and return this form to COVIDVacStudents@queens.edu

Section 1

Student's Name: _____ **QID#** _____
Cell Phone: _____ **Email:** _____

I am requesting a religious exemption from Queens University's mandatory COVID-19 vaccine requirement.

Describe the religious belief or practice that necessitates this request for accommodation:

Describe any alternate accommodations that might address your needs:

Length of time the accommodation is needed: _____

I have read and understand Queens' COVID-19 vaccine requirement regarding medical and religious accommodation. I understand that Queens may need to obtain supporting documentation regarding my religious practice and beliefs to further evaluate my request for a religious accommodation. I understand that the exemption requested above may not be granted, but that if I qualify for the exemption the university will attempt to provide a reasonable accommodation that does not create an undue hardship on Queens. I further understand that granting of my accommodation request may result in the requirement that I wear a mask over my nose and mouth at all times while indoors on Queens' campus and/or participating in university-sponsored activities and other requirements necessary for the health and safety of Queens' campus and community.

I verify that the information I am submitting to substantiate my request for exemption is true and accurate to the best of my knowledge. I understand that any falsified information can lead to disciplinary action as described in [Queens' Honor Code](#).

Student Signature: _____ **Date** _____

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QUEENS UNIVERSITY USE ONLY

Religious accommodation request:

Approved ____/____/____

Describe specific accommodation details:

Denied ____/____/____

Describe why accommodation was denied:

Signature

Printed Name
