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# COVID-19 Vaccine Religious Exception Request Form

*Please note that a sincerely held religious belief does not include philosophical, economic, or political beliefs.*

I am requesting an exception from the COVID-19 vaccination on the basis of a sincerely held religious belief.

## Employee Information

Name \_\_\_\_\_

Job Title / Classification \_\_\_\_\_

Bureau \_\_\_\_\_

Phone Number / Email: \_\_\_\_\_

Supervisor's Name (optional) \_\_\_\_\_

Do you have a City of Portland email address?      Yes       No

How would you prefer to be contacted?      Email       Phone

Which days do you normally work?    Mon     Tues     Wed     Thurs     Fri     Sat     Sun

The best time of day to contact you is:      Mornings       Afternoons       Anytime

## Accommodation Request Information

1. Enter today's date: \_\_\_\_\_

2. Receiving the COVID-19 vaccination conflicts with my religious observances, practices or beliefs as described below. Please describe your religious belief and how it affects your ability to receive a COVID-19 vaccination:



I certify all information that I have provided to be true and accurate and that I sincerely hold the religious beliefs described in this document.

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

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

### **Next Steps**

Complete and return this form through email to your Bureau's Human Resources Business Partner (<https://www.portlandoregon.gov/bhr/article/430513>).

- Your HR Business Partner will confirm that they have received your request for a religious exception request.
- Please note that the City of Portland is not required to provide this exception if doing so would pose a direct threat to the excepted individual or others in the workplace or would create an undue hardship.