Request for Reasonable Accommodation

RELIGIOUS EXEMPTION REQUEST FORM

Download & Save as .pdf to access fillable fields.

To the Employee/Applicant: To initiate this request, please complete this form and submit to the Equity Assurance Office. Attach additional sheets as necessary.

Date of Request: _____

Name of Employee/Applicant: _____

Position Title: _____

EIN: _____

Work Phone:_____ Home Phone: _____

Office/Work Location: _____

Please identify the PGCPS requirement, policy, or practice that conflicts with your sincerely held religious observance, practice, or belief.

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Please describe the nature of your sincerely held religious beliefs or religious practice or observance that conflict with the PGCPS requirement, policy, or practice identified above.

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You may also provide religious materials describing the religious beliefs or practice (optional).

What is the accommodation or modification that you are requesting?

List any alternative accommodations that also would eliminate the conflict between the PGCPS requirement, policy, or practice and your sincerely held religious beliefs.

CERTIFICATION

I _____ certify that the statements, documents, and information provided herein are true and accurate.

_____

Signature_____ Date _____

Return Completed Form via email with Subject: Re: Religious Exemption Request to:

Equity Assurance Office
Prince George's County Public Schools
14201 School Lane, Room 201F
Upper Marlboro, MD 20772
email:equity@pgcps.org
phone: 301-952-6156
fax: 301-952-6056