

THE UNIVERSITY OF TENNESSEE

REQUEST FOR RELIGIOUS EXEMPTION FROM FEDERAL CONTRACTOR MANDATES

The University of Tennessee’s commitment to diversity and equal opportunity in employment and education includes embracing religious diversity and cultivating a community of inclusion and respect. The University prohibits discrimination against employees and applicants for employment based on religious beliefs, practices, and affiliation. In addition, the University provides reasonable accommodation for an individual’s sincerely held religious beliefs and practices unless providing a reasonable accommodation would result in undue hardship to the University, including undermining the University’s core values of integrity, honesty, trust, fairness, and respect toward peers and community.

On September 9, 2021, President Biden signed Executive Order 14042, Ensuring Adequate COVID Safety Protocols for Federal Contractors, (“the Order”). This Order directs all federal contractors, including the University of Tennessee, to follow Guidance developed by the Safer Federal Workforce Task Force. On September 24, 2021 that Task Force issued guidance that requires (1) COVID-19 vaccination of covered contractor employees, except in limited circumstances where an employee is legally entitled to an accommodation; and (2) compliance by individuals, including covered contractor employees and visitors, with the Guidance related to masking and physical distancing while in covered contractor workplaces. The Guidance explicitly suggests that accommodations should be made available to employees who object to these requirements due to a sincerely held religious belief, practice, or observance.

If you wish to request a religious accommodation from either the COVID-19 vaccination requirement or the masking requirement based on your sincerely held religious belief, practice, or observance, please complete this form and submit it through the IRIS Employee Self-Service portal.

To Be Completed by Employee/Applicant (additional pages may be attached)

Name: _____ Job Title: _____

Phone Number: _____ Email: _____

Department: _____ Supervisor: _____

Date of Request: _____

Please specify the tenet of your religious belief, practice, or observance that prevents you from being vaccinated or from receiving other types of medical care.

Please explain why you consider this tenet to be a sincerely held belief:

Verification and Accuracy

I verify that the above information is complete and accurate to the best of my knowledge and I understand that any intentional misrepresentation contained in this request may result in disciplinary action. I also understand that my request for an accommodation may not be granted if it is not reasonable or if it would impose an undue hardship on the University/employer.

Employee/Applicant Signature

Date