



# COVID-19 Religious Accommodation Request Packet

## **Overview**

Marquette University complies with Title VII of the Civil Rights Act and is committed to providing reasonable workplace accommodations to qualified employees to allow them to participate in their sincerely held religious beliefs or practices without undue hardship on the University. Workplace accommodations are defined as a modification or adjustment to a job or the work environment that will enable the individual to perform the essential functions of their role.

## **Process**

Marquette University's Religious Accommodation process is administered by the Human Resources Department. Employees who wish to engage in this process will be asked to complete the following steps:

- Employees must complete the attached form in its entirety and with sufficient detail that demonstrates an employees' bona fide and sincerely held religious belief or practice that precludes the employee from being vaccinated for COVID-19.
- Employees are welcome to attach additional information that supports this request including statements from their religious institution or other supporting documentation.
- Completed documents should be returned to the Human Resources department via email [humanresources@marquette.edu](mailto:humanresources@marquette.edu) or fax: (414) 288-7425.
- Upon receipt of these forms, a member of the Human Resources team will reach out to discuss with the employee. This may include engaging in an interactive process designed to assess the documentation provided, clarify details, request additional information, and to assess the responsibilities and interactions involved in each role. The request is reviewed in consultation with management as appropriate. Each request is evaluated on an individualized basis.
- A finalized response will be provided to the employee and supervisor documenting the final decision.
- For questions, please contact the Human Resources department at (414) 288-7305.

## **Reminders**

- Please note that documenting a sincerely held religious belief alone may not make you eligible for accommodation. The University will also need to assess the undue hardship of the accommodation requested.
- The University is under no obligation to provide the accommodation as requested should other accommodations be available.
- An approved accommodation does not imply permanence. The University reserves the right to revisit any accommodation made should circumstances change.



## COVID-19 Religious Accommodation Request Form *for Marquette University Faculty and Staff Employees*

### Section I: To be completed by faculty or staff employee:

\_\_\_\_\_  
Employee Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Department

\_\_\_\_\_  
Supervisor Name

**Identify your sincerely held religious belief, religious practice or observance that conflicts with a requirement, policy, or practice within the University.**

**Please list the accommodation you are requesting. Are there any other accommodations that could be considered?**

**Do you have a religious objection to all immunizations? If the answer is “no,” please explain why your objection is limited to this vaccine.**

**As an adult, have you ever received any vaccines against any other diseases (e.g., influenza, tetanus)? If the answer is “yes,” what vaccine have you most recently received and when, to the best of your recollection.**

**Are there any other medicines or products that you do not use because of the religious belief underlying your objection? If “yes,” please provide detail.**

**Release of Information:**

My religious beliefs and practices which result in this request for religious accommodation, are sincerely held. I verify that the above information is complete and accurate to the best of my knowledge. I understand that providing any inaccurate and/or misleading information may result in disciplinary action up to and including termination. I further understand that Marquette University may seek clarification of this documentation and may request additional information to fully evaluate my request for religious accommodation. I understand that Marquette University is not obligated to provide any specific accommodation I request but will evaluate my request considering all the information available in deciding what constitutes a reasonable accommodation.

---

Signature

---

Date

Marquette University Human Resources Department  
Email: [humanresources@marquette.edu](mailto:humanresources@marquette.edu)  
Phone: (414) 288-7305 or Fax: (414) 288-7425