



WRIGHT STATE UNIVERSITY

REQUEST FOR RELIGIOUS EXEMPTION FROM THE FLU VACCINE REQUIREMENT FOR THE HEALTH MANAGEMENT INITIATIVE PROGRAM

Wright State University welcomes individuals from all different faiths, philosophies, religious traditions, and other systems of belief. Individuals who demonstrate that the flu vaccine requirement for the Health Management Initiative program unduly burden the free exercise or observation of their sincerely-held religious belief, practice, or observance may be eligible for exemption from those measures. To request an exemption, carefully review these notes and instructions, and submit a signed, completed packet, together with any supporting documentation you wish the University to consider, to: generalcounsel@wright.edu.

1. **Do not use this application for medical/disability accommodations. Instead, contact the Office of Disability Services at ada@wright.edu, or call (937) 775-5680.**
2. The University is entitled to reasonable time to review and process each request. To allow time for processing, please submit your request in advance of your need.
3. Pending requests do not act as temporary exemptions. You must continue to comply with all applicable policies unless and until the requested exemption is approved in writing. Policy violations that occur before an exemption is approved may result in disciplinary action, up to and including termination of employment and expulsion, even if the request is subsequently approved.
4. The submission must:
 - a. Clearly identify the requested exemption.
 - b. Clearly articulate a “religious belief, practice, or observance” the observance or free-exercise of which is adversely affected by a particular measure the University employs to mitigate the spread of the flu.
 - c. Show the the sincerity of the stated religious belief, practice, or observance. (The University will not inquire into whether a stated belief is “correct”, but requests may be denied if you do not establish that the stated belief is sincere.) “Religious” includes traditional tenets of established faiths, and also moral or ethical beliefs as to what is right and wrong, which are sincerely held with the strength of traditional religious views. 29 C.F.R. 1605.1.
5. Answer all questions fully and truthfully. Attach additional sheets if necessary.
6. The University may require supporting documentation or information.
7. Exemptions approved by the University may not be honored by off-campus learning sites.
8. Knowingly making a false statement, with the purpose to mislead a public official in performing official functions is a first-degree misdemeanor, punishable by a fine of up to \$1,000 and imprisonment for a term of up to 180 days. Employees who make false statements to the University may also be subject to discipline up to and including termination of University employment.



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(Review the attached instructions before completing this form.)

Requester Name

Date of Request

Email Address

Telephone Number

Explain the exemption you are requesting

Explain the nature of all religious beliefs, practices, or observances pertinent to your request.

Explain how the flu vaccine requirement for the Health Management Initiative program conflict with, or infringe upon the free exercise of your stated religious beliefs, practices, or observances.

I hereby swear, state, or affirm that the foregoing responses are true and correct. (Sign below.)