



CULVER CITY UNIFIED SCHOOL DISTRICT

REQUEST FOR A RELIGIOUS EXCEPTION TO THE COVID-19 VACCINATION REQUIREMENT

CCUSD policy requires all employees to be vaccinated against COVID-19, with exceptions only as allowed by law. In certain circumstances, the law may entitle an employee who has a religious objection to the COVID-19 vaccination requirement to an exception from that requirement, in which case the employee would instead comply with alternative health and safety protocols. CCUSD is committed to respecting the important legal protections for religious liberty. The purpose of this form is to determine whether you may be eligible for an exception.

To be eligible for a possible exception, you must first establish that your refusal to be vaccinated is based upon a sincere belief that is religious in nature. A refusal to be vaccinated does not qualify for an exception if it is based upon personal preference, concerns about the possible effects of the vaccine, or political opinions.

In order to request a religious exemption, please fill out this form. CCUSD may ask for other information as needed to determine if an exception could be legally granted.

1. Please describe the nature of your objection to the COVID-19 vaccination requirement.

2. Would complying with the COVID-19 vaccination requirement substantially burden your religious exercise? Please explain.

3. How long have you held the religious belief underlying your objection?

4. Please describe whether, as an adult, you have received any vaccines against any other diseases (such as a flu vaccine or a tetanus vaccine) and, if so, what vaccine you most recently received and when, to the best of your recollection.

5. If you do not have a religious objection to the use of *all* vaccines, please explain why your objection is limited to particular vaccines.

6. Please provide any additional information that you think may be helpful in reviewing your request.

7. In the space below, please provide a written statement detailing the religious basis for your COVID-19 vaccination objection, explaining why you are requesting this religious exemption, the religious principle(s) that guide your objections to vaccination, including any religious doctrine or belief that prohibits the COVID-19 vaccination. Please attach additional documentation, if necessary.

I certify that my statement above is true and accurate and that I hold a sincere religious belief, practice or observance that prevents me from receiving the COVID-19 vaccination.

Printed Name: _____

Signature: _____

Date: _____