

## STUDENT RELIGIOUS ACCOMMODATION REQUEST FORM

Student Name: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Department: \_\_\_\_\_

Date of Request: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Program/Major: \_\_\_\_\_

1. Please identify the University requirement, policy, or practice that conflicts with your sincerely held religious observance practice or belief (hereinafter “religious beliefs”). Attach additional pages, if needed.
2. Please describe the nature of your religious beliefs that conflict with the University requirement, policy, or practice identified above?
3. Please describe the specific accommodation(s) you are requesting?
4. List any alternative accommodation(s) that also would eliminate the conflict between the requirement, policy, or practice and your religious beliefs?
5. How long do you anticipate the need for the accommodation(s) you are requesting? Please provide an anticipated start and end date if the request is not for a permanent accommodation.

## *Student Acknowledgement*

I acknowledge that, in some cases, the University will need to obtain additional information, documentation, or other authority regarding my sincerely held religious beliefs. I understand that such additional information does not take any specific form and is determined on a case-by-case basis. If requested, I understand that I am to provide such additional information, documentation, or other authority to support my requested accommodation based on my religious beliefs or provide a written explanation as to why I am unable to provide such information.

I understand that my request for an accommodation may not be granted if the accommodation is not reasonable, results in a fundamental alteration of University programs, and/or creates an undue hardship for the University.

I verify that the above information I have provided is complete and accurate to the best of my knowledge.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## *Instructions and Next Steps*

1. Students are encouraged to work with faculty directly at the beginning of each semester to request religious accommodations, for which this form may be useful. The Program Director of Religious and Spiritual Life Initiatives is available to support both students and faculty members in the process. With that in mind, please submit this completed form to all of the following:
  - Your course instructor (if you are requesting academic accommodations); and
  - The Program Director of Religious and Spiritual Life Initiatives - [cmursli@andrew.cmu.edu](mailto:cmursli@andrew.cmu.edu)
2. Requests for religious accommodation will be kept private consistent with the Family Educational Rights and Privacy Act (FERPA) and shared only with those University employees who have a legitimate need to know, including employees necessary to review the request and/or to implement any approved accommodation.
3. After review, you will be notified in writing of the decision regarding your requested faith-based or religious accommodation.