Office for Access and Equity

UIC Employee Request for Reasonable Accommodation Based on Religious Reason

This form is to be used when an individual is seeking a religious accommodation because his or her sincerely held religious belief(s) or practice(s) conflict with the work environment.

SECTION 1: EMPLOYEE'S INFORMATION AND REQUEST (**To Be Completed By Employee**)

First Name	Last Name	Phone Number

Email	Job Title/Classification

Street Address

City	State	Zip Code

College/Department/Unit	Status (AP, Extra Help, Faculty, Support Staff)

Supervisor's First Name	Supervisor's Last Name	Supervisor's Phone Number

Supervisor's Email	

Identify Requested Accommodation

Identify duration and length of requested accommodation (e.g. temporary or permanent; amount of time)

Certification: My religious beliefs and practices, which result in this request for a religious accommodation, are sincerely held. I understand that my request for an accommodation may not be granted if it is unreasonable and/or if it creates an undue hardship on my employer. I understand I may be asked to provide verification.

Employee Signature	Date

SECTION 2: COLLEGE/UNIT/DEPARTMENT REVIEW (**To Be Completed By Employee's Supervisor or Human Resources Representative**)		
First Name	Last Name	Phone Number
Email	Job Title/Classification	
Evaluation of Impact to College/Unit/Department (if any)		
Date Discussed with Employee	Decision (Approved/Modified/Denied)	
Accommodation Agreed Upon (explanation)		
Supervisor Signature	Human Resources Signature	
Date	Date	

SECTION 3: FINAL DECISION **(To Be Completed By the Office for Access and Equity)**	
1. Request is: ☐ Approved ☐ Modified (explanation) ☐ Denied	
OAE Representative Signature	Date