City of Philadelphia

Request for Religious Exemption from COVID-19 Vaccination (Please print legibly)

| Name: | | |
|-------------|-------|--|
| Department: | Unit: | |
| Supervisor: | | |

The City of Philadelphia's mandate regarding the COVID-19 vaccination, may allow for a religious or sincerely held belief exemption if:

- (i) the employee holds a religious or sincerely held belief which is not necessarily based on a religious tenant which are contrary to the practice of vaccination,
- (ii) completes this form, and
- (iii) provides the required personal statement and documentation (if applicable) to support the exemption request.

The City of Philadelphia is committed to providing a safe, inclusive, and supportive experience for all and recognizes and protects an employee's religious or **sincerely held belief** as it pertains to the practice of vaccination. Religious exemptions must be requested annually

Individuals with an approved exemption will be required to comply with COVID-19 testing and other preventive requirements as specified in the exemption approval and as may be updated by later policies. These requirements may be amended in order to protect all members of the communities we serve.

This request will be reviewed, approval is not guaranteed. After your request has been reviewed and processed, you will be notified, in writing, if an exemption has been granted or denied. The decision is final and not subject to appeal.

Religious exemption process:

- Complete and sign the following page of this form;
- Complete and submit the Personal Statement outlining your justification;
- You may have your religious leader submit the Religious Organization Statement Form; this is not a requirement to have your exemption considered
- Submit the completed documents.

Once you have completed this document, submit, along with all documentation, to the Employee Relations Unit by emailing to EmployeeVax@Phila.gov or provide to your HR Manager

Incomplete submissions will not be reviewed.

City of Philadelphia

| Print Name: | Religion: | |
|--|--|--|
| Department: | Date: | |
| Email: | Contact Number: | |
| Initial next to each of the statements below: I request exemption from the COVID-19 vaccination religious beliefs. I assume the risks of non-vaccination. I accept full responsibility for my health. I will comply with assigned COVID-19 testing require guidance and requirements for unvaccinated individence and requirements for unvaccinated individence. Please provide a personal written statement detailing your vaccination exemption, and explaining why you are request your informed consent to request a vaccination exemption vaccination. Describe the nature of your objection to the Cowith the requirement substantially burdens your religious ereligious and/or sincere belief underlying your objection. Public below be insufficient and any documents you wish to suppose | religious or sincerely held belief for requesting a ting this exemption, the principle(s) that guide, and the basis that prohibits the COVID-19 OVID-19 vaccination requirement; how complying exercise or belief; and how long have you held the rovide an attachment should the space provided | |
| | | |
| I hereby certify that the statement provided is true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein, I am subject to such penalties as may be prescribed by statute or ordinance." Any intentional misrepresentation may result in legal consequences, including termination or removal from employment with the City of Philadelphia. Signed Date | | |