



GEORGIA STATE UNIVERSITY
RELIGIOUS ACCOMMODATION REQUEST FORM

Contents of this request may be shared only as necessary to consider the granting and/or implementation of an appropriate accommodation.

Please see Notice to Requestor on Page 2 for additional information.

Georgia State University (GSU) is committed to diversity and inclusiveness. A reasonable religious accommodation in the employment setting is any adjustment to the work environment or in the way tasks or responsibilities are customarily done that enables an individual to participate in his/her sincerely held religious practice or belief without undue hardship on the conduct of GSU's business or operations. For questions regarding your request, please contact the Office of Opportunity Development and Diversity Education Planning (ODDEP) at 1 Park Place South, Suite 527 Atlanta, GA 30303 or at 404-413-2563 / equalopportunity@gsu.edu

INSTRUCTIONS: To consider your request for a religious accommodation in the employment setting and to begin the interactive process, please provide the following information.

Requestor Information

Name of Requestor: _____ Date: _____

Status (Check one): Faculty ___ Staff ___ Temp ___ GRA/GA ___ Student-Employee _____

Address: _____ Phone: _____

GSU Email: _____ How do you prefer we contact you? Phone ___ Email ___ Mail ___

Supervisor Information

Name of Immediate Supervisor: _____

Position/Title: _____ Dept./College/Unit: _____

Work Phone: _____ Work Email: _____

PLEASE IDENTIFY THE FOLLOWING:

The specific accommodation you are requesting. For example, time to pray, leave for religious observance, modification to uniform to wear religious attire, etc.

Indicate the religious practice or belief and state how this request enables you to participate in your religious practice or belief, without impacting your ability to meet the essential functions in your job description.

Notice to Requestor

Please Note: In some cases, GSU may need to obtain documentation or other authority regarding your religious practice or belief.

If requested, can you obtain documentation or other authority to support the need for an accommodation based on your religious practice or belief? Yes ____ No ____

I verify that the above information is complete and accurate to the best of my knowledge and I understand that any intentional misrepresentation contained in this request could result in disciplinary action, up to and including termination.

Signature: _____ Date: _____

Work Plan

If an accommodation is deemed appropriate and reasonable, both the employee and the departmental representative are notified and a religious accommodation work plan is implemented for the duration specified.

The Office of Opportunity Development and Diversity Education Planning will monitor the work plan and review it on occasion to ensure the accommodation enables the employee to complete the necessary work tasks and to ensure effectiveness.

Note: No specific accommodation is guaranteed. Rather, accommodations are determined on an individualized basis and must be tailored to match the needs of the employee without placing an undue hardship on the department. You are not required to accept any accommodation nor will the University impose any accommodation on you.

For ODDEP Use Only:

Date Received: _____ **Signature:** _____ **Form is: Complete / Incomplete**