REQUEST FOR ACCOMMODATION FOR RELIGIOUS OBSERVANCES
STUDENT FORM

Instructions

Student
- Fill out form
- Submit to professor as early in term as possible, preferably by end of second week of term
- Submit separate form for each requested observance and for each course

Instructor
- Fill in the bottom section of the form
- Return original form to student
- Retain photocopy of completed form
- Photocopy back-to-back to include all information

Department: ___________________________________________________
Subject and Number: ____________________________________________________________________
Instructor name: ________________________________________  Date submitted: _________________
Student name: _________________________________________    Phone: ________________________
Student signature: ______________________________________    E-mail: ________________________
I request accommodation for the following religious observance:
Name of religion: __________________             Name of Holiday: ________________________________
Day(s), date(s), and time(s) of religious holiday:
(e.g., "sundown Monday, September 29, through sundown Tuesday, September 30")
_______________________________________________________________________
Briefly state the requirements of this religious observance that will prevent you from attending class, taking an examination, or fulfilling other academic requirements.
(e.g., “Because work is prohibited on this holiday, students observing it are not to attend classes, take examinations, or perform other class requirements”)

Please note: In general, faculty do not have to consider accommodations for the purpose of allowing students to travel away from Eugene for a religious observance, although that may be necessary in some instances

(Optional) Suggested accommodation/s (e.g., makeup examination):
This request has been accepted by the instructor, and the following accommodations will be allowed:

Instructor Name: _________________________________________________

Signature: ______________________________________________________

Date: __________________________________________________________