

SOUTHWESTERN COLLEGE
STUDENT RELIGIOUS ACCOMMODATION REQUEST FORM
(Accommodation to COVID – 19 Vaccine Mandate)

Student Name:

Student ID:

Student Phone Number:

Student EMAIL:

Based on my sincerely held religious belief, practice, or observance, I am requesting a religious accommodation in connection with Southwestern College's COVID-19 vaccine mandate.

Please identify your sincerely held religious belief, practice, or observance that is the basis for your request for religious accommodation.

Please briefly explain how your sincerely held religious belief, practice, or observance conflicts with Southwestern College's COVID-19 vaccine mandate.

I request exemption from the COVID-19 immunization requirement due to my sincere religious beliefs. I understand and assume the risks of non-vaccination. I accept full responsibility for my health, thus removing liability from Southwestern College with respect to the required vaccinations.

Yes

No

Religious Form: I understand that if I am approved for a religious exemption, I will be required to get tested for COVID-19 twice a week while taking in-person classes. I understand that if I am found to be non-compliant with the testing requirements or any other COVID-19 protocols, I may be dropped from my in-person classes. I understand that I must follow Southwestern College's/County of San Diego's protocols with respect to COVID-19 symptom reporting, self-isolation, & self-quarantine procedures if I experience symptoms associated with COVID-19 or I am identified as a close contact to someone who has been confirmed or is likely to have COVID-19. I understand that any falsified information or failure to follow testing requirements can lead to student disciplinary action per Administrative Procedures 5500/5520. Current COVID-19 protocols can be found on swccd.edu/swcreturns.

Student Signature:

Date:

Date Received by SWC:

By: