

Vaccination Accommodation Request Form

In support of Hartwick College’s commitment to health and safety for all members of its community, the College will require all students, faculty and staff who will live, study, or work on campus during the Fall 2021 semester to be fully vaccinated with an approved COVID-19 vaccine unless a reasonable accommodation for medical (including pregnancy), or religious reasons is approved per the Hartwick College [COVID-19 Vaccination Policy](https://drive.google.com/file/d/1-bTqFvaNG5XSa_sHvXmRqqCsyXL7MBkZ/view).

Any student or employee who has a documented disability that precludes them from receiving the COVID-19 vaccine, or a sincerely held religious belief, practice or observance that prevents them from receiving the COVID-19 vaccination, may submit their request for a reasonable accommodation.

Please print and complete this form. There are instructions in the form for returning a scanned copy of the form to the College.

**Section I: Request Details**

Student ☐ Employee ☐ Name:

Accommodation Requested: Medical ☐ Religious ☐

Please respond to the following questions by typing your answers below.

Medical Request

* Please thoroughly explain the documented disability or medical condition that precludes you from receiving the COVID-19 vaccination.
* Please submit your completed request form, along with a statement from your healthcare provider stating that you are medically unable to receive the vaccine to:
  + Students- Accommodations Review Team at [studentaccommodations@hartwick.edu](mailto:studentaccommodations@hartwick.edu)
  + Employees- Office of Human Resources at [humres@hartwick.edu](mailto:humres@hartwick.edu)

Religious Request

* Please thoroughly explain the sincerely held religious belief, practice, or observance that prevents you from receiving the COVID-19 vaccination.
* Please submit your completed request form to:
  + Students- Accommodations Review Team at [studentaccommodations@hartwick.edu](mailto:studentaccommodations@hartwick.edu)
  + Employees- Office of Human Resources at [humres@hartwick.edu](mailto:humres@hartwick.edu)

**Section II: Signature**

**I understand that my request for a medical or religious accommodation is subject to approval. Hartwick College’s Accommodations Review Team (students) and Office of Human Resources (employees) will review your request and associated documentation and provide you with a determination.**

Signature:       Date:

**Section III: Documentation and Approval**

Date Request Received:

Date Documentation Received (Medical):

Date of Determination and Notification:

*HR- May 2021*