

Religious Accommodation Request Form: COVID-19

To Be Completed By Associate

(Please attach additional pages if needed)

Part 1 – Background

DENSO provides reasonable accommodations for an individual's sincerely held religious beliefs consistent with federal, state, and local law, unless providing a reasonable accommodation would result in undue hardship to the company.

To be eligible for possible accommodation, you must establish that your refusal to be vaccinated is based upon a sincere belief that is religious in nature. A refusal to be vaccinated does not qualify for an accommodation if it is based in personal preference, concerns about the possible effects of the vaccine, or political opinions. The information you provide in this form will enable us to evaluate your request and decide whether and how we can grant an accommodation. We may ask you for more information about your request.

While DENSO respects your religious and personal beliefs, we must also comply with applicable requirements as an employer. We expect you to cooperate with us as we evaluate accommodation requests, including providing true and accurate information in furtherance of accommodation requests. If DENSO determines that you have failed to cooperate with our information requests or that you have acted dishonestly in the process, then DENSO may deny the accommodation request. Additionally, if you have acted dishonestly in the process, DENSO reserves the right to take disciplinary action against you, including potentially terminating your employment.

The information provided in this form will be used to evaluate your accommodation request and decide whether and how DENSO may grant an accommodation. Responses and any supporting materials provided in this form will remain confidential and may only be accessed by HR, SHE, Legal and Audit Associates with responsibilities related to the purposes described above, except in cases where disclosure to a public health or other governmental authority is required. Please do not include any personal health/or diagnosis information in your responses. Any question about this form may be directed to your TMS leader.

Part 2 – Accommodation Request

I am experiencing a conflict between a sincerely held religious belief, observance, or practice and a work rule or requirement related to COVID-19, and I request an accommodation in an effort to eliminate and/or minimize this conflict. I understand that if granted an accommodation from the Company's vaccination requirement, I may be required by applicable law and/or Company policy to submit to weekly COVID-19 testing and other mitigation measures. The following information is provided in support of my request.

Name (print):	Date:
Dept.:	Position:
Manager:	Work/Cell Phone:
Email Address:	

1. Describe the sincerely held religious belief, observance, or practice for which you seek an accommodation:

2. Identify the COVID-19 related work rule or job requirement that you believe conflicts with your religious belief, observance, or practice:

3. Specifically describe the conflict between your religious belief, observance, or practice and the work rule or job requirement at issue:

4. Is the religious belief you identified above based on an organized religious faith to which you belong? If yes, what is that organized religious faith? If no, write "N/A" in the space below.

5. If your request for accommodation is not based on an organized religious faith to which you belong, please describe the basis for the religious belief. Write "N/A" in the space below if you substantively answered No.6.

6. Please describe whether, as an adult, you have received any vaccines against any other diseases (such as a flu vaccine or a tetanus vaccine) and, if so, what vaccine you most recently received and when, to the best of your recollection.

7. If you do not have a religious objection to the use of all vaccines, please explain why your religious objection is limited to particular vaccines.

8. Please explain how the religious belief affects other aspects of your life, such as whether it prevents you from taking certain medications.

a. Does your religious belief prevent you from receiving medical care?

Yes _____ No _____

b. Based on your religious belief, are you unable to take certain prescription or over-the-counter medications?

Yes _____ No _____

c. Based on your religious belief, do you need to follow certain dietary restrictions?

Yes _____ No _____

9. Identify any accommodations that you feel could be taken to resolve the conflict you have described, while still allowing you to perform all essential functions and keep you and all others equally safe. Please be as specific as possible:

10. If the above accommodation cannot be granted, describe any alternative accommodations you feel would be equally effective at allowing you to observe your sincerely held religious beliefs, while at the same time allowing you to perform all essential functions of your job and keep all those in the workplace equally as safe as the rule or requirement for which you seek an exception:

Any additional comments? _____

My religious beliefs and practices, which result in this request for a religious accommodation, are sincerely held. I understand that the Company will attempt to provide a reasonable religious accommodation that does not create an undue hardship on its business operations. I also understand that my preferred accommodation may not be granted if another equally effective accommodation is identified by the Company.

The information in this request is true and accurate. I understand that providing false, misleading, or incomplete information is grounds for discipline, up to and including termination from employment.

Print Associate Name _____

Associate Signature _____ Date _____

Instructions to the Supervisor: Once the associate has completed this request form, please contact your company's TMS department.

HR USE ONLY

Date of initial request: __/__/____ Date certification received: __/__/____

Accommodation request:

- Approved __/__/____
Describe specific accommodation details:

- Denied __/__/____
Describe why accommodation is denied:

