

PROCLAMATION 20-12.5 (STUDENT VACCINE REQUIREMENT)
RELIGIOUS EXEMPTION REQUEST FORM

INSTRUCTIONS FOR USE

This form incorporates the requirements of Proclamation 20-12.5: Higher Education, which removed the philosophical exemption option for students. In accordance with the proclamation, Walla Walla Community College is a vaccinated campus and is requiring all students participating in programs, courses, operations, events, or other activities on campus to be fully vaccinated against COVID-19, subject to any medical exemptions required by law and any religious exemptions.

INSTRUCTIONS

By September 27, 2021, all students seeking an exemption must select the medical (or religious) exemption option in the student attestation form.

By October 6th, in order to grant a reasonable accommodation to a student to remain unvaccinated, Walla Walla Community College must receive documentation that confirms the student has a sincerely held religious belief that prevents them from receiving the COVID-19 vaccine. The religious exemption must be based on a ***sincerely held religious belief*** that is comprehensive in nature. Social, political, or economic philosophies, as well as personal preferences, are not religious beliefs.

Instructions for students:

Below are initial questions for you to respond to in requesting a sincerely held religious belief exemption pursuant to Proclamation 20-12.5 exemption.

Please return this form via the secure upload portal. This will allow for secure transmission and for you to receive confirmation of submittal.

Please complete your response as soon as possible but no later than October 6, 2021 to help us assure timelines for response can be met. If you have any questions or need more information, please do not hesitate to contact: studentcovidinfo@wwcc.edu or call 509-529-5454.

Questionnaire:

1. Student Identification Number: _____.
2. I assert that I have a sincerely held religious belief or religious conviction that prevents me from receiving the COVID-19 vaccine. **YES** **NO**
3. I affirm/agree that I have never received a vaccine from a health care provider as an adult. **YES** **NO**

WWCC reserves the right to review COVID-19 exemptions and accommodations extended to students in light of changing public health conditions, changes in Washington State policy, and the emergence of new information.

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In most circumstances, the College will need to obtain additional follow-up information about your sincerely held religious belief(s). The College will reach out to you if additional information is needed to process this request.

I certify that I have read and understood the information provided in this request, and that it is true to the best of my knowledge, information and belief.

Student Signature

Date

Parent or Guardian's Signature
(If student is under 18 years of age)

Date

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