MHC request for religious accommodation

This form should be submitted to the professor/staff by the drop/add period in the semester in which the request applies. A separate form must be submitted for each course in which an accommodation is needed. An electronic copy of the completed request/s should be sent by email to the Office of Religious and Spiritual Life once a decision is made.

Date/s of Religious Observance

Religious Affiliation:

Name of Course/Place of Work:

Student Name:

Name of Professor/Supervisor:

Religious observance (please define the reason for the accommodation, i.e. holiday, fasting, etc.)

Approved or Not Approved (please circle)

Explain reason for not approving

Student Signature: ___________________________ Date ___________________________

Send copy to the Office of Religious and Spiritual Life 413-538-2054 aclatten@mtholyoke.edu