GONZAGA UNIVERSITY
STUDENT ACADEMIC RELIGIOUS ACCOMMODATION REQUEST FORM

Student Information

Student's Name:_____

E-mail Address:_____ Telephone Number: _____

Class Information

Course Title/Course Number/Course Section:_____

Faculty Member's Name/Department:_____

School/College: ☐A&S ☐SNHP ☐SLS ☐SEAS ☐SOE ☐SBA ☐Law

Requested Accommodation(s)

A. Religious Holiday/Activity Accommodation Request and Date(s)

_____

B. Explain how the examination schedule or other academic activities conflict with the observance of your religious holidays.

_____

C. Identify the accommodation(s) or modification(s) you are requesting that would eliminate the conflict.

_____

Verification

I verify that my religious beliefs are sincerely held and that I am motivated by religious purpose to request this accommodation to observe my religious holidays. I understand that in determining whether to grant this request the University may inquire as to the sincerity of my belief s as well as the purpose for my request. The University may also be limited in its ability to provide an accommodation that presents an undue hardship to the University or a fundamental alteration of the nature or operation of the academic program or course.

_____ _____

Date Student Signature

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For Faculty Use Only

FACULTY RESPONSE

Academic Implications:

_____

_____

_____

_____

_____

_____

Is there an alternative accommodation that can be provided?

- ☐ Yes
- ☐ No

Identify an alternative accommodation(s):

_____

_____

_____

_____ _____

Date Faculty Signature

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For Office of Inclusive Excellence Use Only

DECISION

Request Approved:

- ☐ Yes
- ☐ No
- ☐ Yes (with modifications)

Identify accommodation(s) provided:

_____

_____

If denied, state the reason (e.g., fundamental alteration, undue hardship).

_____

_____

_____
Date

_____
Office of Inclusive Excellence Signature

_____
Print Name

_____
Title

Submit completed form(s) InclusiveExcellence@gonzaga.edu or deliver to the Office of Inclusive Excellence, College Hall 240.

APPEAL PROCEDURE

A student may appeal the decision by submitting the appeal in writing to the Provost at Provost@Gonzaga.edu no later than five (5) calendar days af ter the date the student received the Chief Diversity Officer's decision. See the Religious Accommodations Policy on submitting an appeal. The decision of the Provost or their designee will be final.

ADDITIONAL INFORMATION

- Gonzaga University Policy on Religious Accommodations for Students: https://my.gonzaga.edu/academics/registration-enrollment/registrar-office/policies-procedures/academic-policies-procedures
- Questions about the interpretation or application of the Policy on Religious Accommodations on Students should be raised with the Office of Inclusive Excellence. Please contact Office of Inclusive Excellence at College Hall 240 or InclusiveExcellence@Gonzaga.edu.