

MONTGOMERY COUNTY PUBLIC SCHOOLS

Employee Request for Religious Accommodation

Office of Human Resources and Development (OHRD)
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

INSTRUCTIONS

Employees must use the electronic or PDF versions of this form when requesting a religious accommodation.

Employees are highly encouraged to use the electronic version of this form found online at <https://forms.gle/WB7y13xESJycMmAQA>. Forms can be emailed to khalid_d_walker@mcpsmd.org.

Questions about religious accommodations or modifications may be directed to khalid_d_walker@mcpsmd.org.

REQUESTOR INFORMATION: *To be completed by the requestor and submitted*

Name: Last _____ First _____ MI _____

Employee ID _____ Preferred Phone _____ - _____ - _____ Work Location _____

Describe requested accommodation

Indicate duration of requested accommodation (temporary, permanent; amount of time)

Describe the religious belief or practice that necessitates this request for accommodation

I certify my religious beliefs and practices, which result in this request for a religious accommodation, are sincerely held. I understand that my request for an accommodation may not be granted if it is unreasonable and/or if it creates an undue hardship on my employer. I understand I may be asked to provide supporting documentation regarding my religious practice and beliefs to further evaluate my request for a religious accommodation.

Requestor Signature _____ Date ____/____/____

TO BE COMPLETED BY _____

Approved Denied

Explain

Printed Name _____ Title _____

Signature _____ Date ____/____/____

Note: This document is available in alternative format upon request. Contact the Department of Communications, Montgomery County Public Schools, 850 Hungerford Drive, Rockville, MD 20850. Telephone 240-740-2837.