

## **Request Form for Non-Member Religious Exemption/ Accommodation Related to COVID-19 Vaccine**

**Please return this form to Director of Operations/Finance at [jlowery@gileadpraisepa.com](mailto:jlowery@gileadpraisepa.com)**

This document is intended for use as a reference when applying for religious exemption/accommodation to the COVID-19 immunization requirements for non-members. Its purpose is to assist in establishing the religious basis for your request on the basis of sincere religious belief. Philosophical, political, scientific, or sociological objections to immunization **do not** justify an exemption or accommodation.

In order to qualify for the exemption each request will attest to being Born-again through the sacrifice of Jesus Christ (Rom 10:9). Each person will receive a letter of support for a Religious Exemption. Please note your place of employment may ask for a letter of your own stated beliefs. Gilead PWC does not make any guarantees that the letter of support will help your place of employment or other business receiving the exemption to grant your the request for exemption.

The statement **must** address **all** of the following elements:

- Explain in your own words why you are requesting this religious exemption.
- Describe the religious principles that guide your objection to immunization.
- Indicate whether you are opposed to all immunizations, and if not, the religious basis that prohibits particular immunizations.

Gilead PWC INC will notify you as to the approval or denial of your request.

*To Be Completed by Non-Members Requesting Religious Accommodation:*

**Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Date of Request:** \_\_\_\_\_

**Please document below or attach a separate document explaining why you are requesting an Exemption/Accommodation:**

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## **Supplemental Information for Employer Religious Exemption/ Accommodation Related to COVID-19 Vaccine**

Supporting materials may be requested by your employer, which include any of the following:

- A letter from an authorized representative of the church, temple, religious institution, etc. that you attend, or literature from the church, temple, religious institution, etc. explaining doctrine/beliefs that prohibit immunization (Note: you need not necessarily be a member of an organized religion or religious institution to obtain a religious exemption);
- Other writings or sources upon which you rely in formulating religious beliefs that prohibit immunization;
- Any documents or other information you may be willing to provide that reflect a sincerely held religious objection to immunization.

Should your employer request a follow-up with a church leader please direct them to write us an email and/or letter to the below addresses: Email:  
[jlowery@gileadpraisepa.com](mailto:jlowery@gileadpraisepa.com) or

Gilead Praise & Worship Center Incorporated  
1837 South 5th Street, Philadelphia, PA 19148.

**Name of Employer:** \_\_\_\_\_

**Department/Division:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_