

**RELIGIOUS ACCOMMODATION REQUEST FORM
FOR EXEMPTION FROM VACCINES
FOR JOHNS HOPKINS ALL CHILDREN'S HOSPITAL (only)**

It is strongly advised that all employees who have not been vaccinated consider wearing a face cover, especially during flu season, as per our policy.

I am a new pre-employment hire requesting an exemption from the mandatory Flu ____/
Tdap ____/ MMR ____/ Varicella ____ vaccine requirements. *(please check all that apply)*

Name: _____ Start Date: _____

Email: _____ Phone Number: _____

Entity/Hospital: JHACH Department: _____

Position: _____

Reason for Religious Accommodation Request (Please explain why your religious belief prevents you from receiving this vaccine.):
