

WVU PARKERSBURG REQUEST FOR ACCOMMODATION FOR RELIGIOUS OBSERVATIONS Student Form

Instructions

Department:	Subject, Number, CRN:	
Instructor Name:	Date Submitted:	
Student Name:	Student ID# :	
Phone:	WVUP Email Address:	
Student Signature:		
I request accommodation for the following relig	gious observance:	
Name of Religion:	Name of Holiday:	
Day(s), date(s), time(s) of religious holiday: (e.g.: "sundown Monday, September 29 through sun	ndown Tuesday, September 30")	
fulfilling other academic requirements.	observance that will prevent you from attending class, taking an ex students observing it are not to attend classes, take examinations, or perj akeup exam, change date for presentation, etc.)	
This request has been accepted by the instructo	r, and the following accommodations will be allowed:	
This request has been accepted by the instructo	r, and the following <i>modified</i> accommodations will be allowed:	Initial
		Initial
This request has been received by the instructor	r, but the requested accommodations are not allowed because (rea	son):
		Initial
Instructor Name:		
Signature:		
Date:		

Instructions

Student	 Fill out form Submit to instructor as early in the semester as possible, preferably by the end of second week of semester Submit separate form for each requested observance and for each course
Instructor	 Fill in the bottom portion of the form Return original form to student Retain photocopy of completed form Photocopy back-to-back to include all information

Mission Statement

West Virginia University at Parkersburg provides accessible, life-changing, educational opportunities in a safe and supportive environment.