

DECLARATION

My name is _____ and I declare under penalty of perjury under the laws of the United States of America that the following is correct and true.

1. I work at _____, located at the following: _____
2. My job includes the following duties:

3. I have been told by _____, who is an agent for my employer, that I must be vaccinated by _____.
4. I have been told that I must report the details of my vaccination, using the following method:

5. When I was hired, I was not required to give details regarding my vaccination status.
6. My vaccination status is irrelevant to my job.
7. I have or will object to my employer's mandate to be vaccinated and seek or have sought an exemption from this mandate based on one or more categories, detailed on pages following post signature: a) sincerely held Religious Belief; b) qualifying Medical Condition; c) Conscientious Objection. Instead of explaining what I told my employer, I may have substituted what I have already filed as part of my exemption request.
8. If provided an exemption, I would suggest or have suggested that reasonable accommodations would successfully offer a safe working environment that is at least as safe as the vaccination, including:

9. If required to be vaccinated I have been told by _____ that I may be terminated; that termination will cause me irreparable harm by damaging my career and professional reputation and eliminating my best source of income.

10. Other:

Executed on _____, 2021

FIRST M. LAST

1. **RELIGIOUS EXEMPTION** – based on a sincerely held religious belief that would be violated by use of any available vaccine to combat COVID-19 and variants

I sincerely believe that I should not participate in the present COVID-19 vaccination process for the following reasons:

2. **MEDICAL EXEMPTIONS** – based on a medical condition which contraindicates the use of any available vaccines to combat COVID-19 and its known variants.

I have a medical condition which indicates that I should not take any available vaccine, as follows:

3. CONSCIENTIOUS OBJECTION EXEMPTION – based on a firm, fixed, and sincere objection to COVID-19 vaccination by reason of training or belief, including political, sociological, or philosophical views which may warrant exemption.

I believe one or more of the following:

- a) I should not take any available vaccine for COVID-19;
- b) be required to take any available vaccine; or
- c) report my vaccine status to _____ to avoid job loss because it violates my conscience, as follows: