Statement of Religious Objection to Influenza Vaccine

UMMS staff member: When the form below has been completed, please visit <u>umms.org/FluVaxExemptions</u> to complete an online declination and to upload this completed document.

Employee Name	Date of Birth
UMMS Member Org.	Employee ID
Job Title	Name of Supervisor
Email Address	Phone Number
I am requesting a religious exemption from the I	Influenza Vaccine Mandatory Vaccination Policy, and in support of tha
request state the following:	
(Social, political, or personal preferences	practices that prohibit me from receiving the influenza vaccine. s are not "sincerely held religious beliefs.") bus beliefs or practices are as follows (please describe the reason why receiving the influenza vaccine)*:
same as your COVID-19 vaccine request: Please grounds on which I requested an exemption for	n the COVID-19 vaccines and the basis for your flu vaccine request is to select the "I am requesting an exemption for the flu vaccine on the sathe COVID vaccine" option via the "Submit Your Religious Exemption up do not need to submit additional documentation for the flu vaccine.
religious beliefs. I understand that I am expected	omit that I am providing truthful information regarding my sincerely held to tell the truth. If UMMS becomes aware that I am not being truthfaction, up to and including termination from employment.
Employee Signature:	
Date:	