

Student Name: _____ Parish Name: _____

CATHOLIC DIOCESE OF ARLINGTON FAITH FORMATION REQUEST FOR RELIGIOUS ACCOMMODATION TO MASK MANDATE

The Order of Public Health Emergency requiring the wearing of masks indoors in all Virginia K-12 schools, issued by the State Health Commissioner on August 12, 2021, included the following provision:

“Any person ... with a sincerely held religious objection to wearing masks in school may request a reasonable accommodation.”

Where a faith formation program is being held in a school, the August 12th Public Health Order is to be followed.

The Catholic faith does not provide a basis for a religious objection to masks. However, an individual who otherwise asserts a sincerely held religious objection to wearing masks during faith formation activities based upon their personal religious beliefs may use this form to request a reasonable accommodation.

Note: A reasonable accommodation for masks does not mean a child will have complete exemption from COVID-19 protocols. If a student/family has a sincerely held religious objection to masks, the Parish will propose a reasonable accommodation based on the information provided below and the relevant circumstances of the Parish. If the accommodation proposed by the Parish is not acceptable to the family, the student will not be permitted to attend faith formation activities until the state’s mask mandate is lifted.

Possible accommodations that the Parish may propose include, but are not limited to, the following:

- wearing a transparent face shield
- shielding around student desk
- maintaining social distancing of >6 feet from others
- periodic testing for COVID-19

A Parish representative will have a conversation with the parent or guardian about the circumstances and the proposed accommodation.

To request an accommodation, please complete the box below:

I hereby affirm that the wearing of a mask during faith formation activities conflicts with the above-named student's/my religious tenets or practices for the following reasons: (please print; use back of page for extra space)

Signature of Parent/Guardian/Student (if over 18): _____ **Date:** _____

----- To be Completed by Parish and Pastor (where applicable) -----

An accommodation was ___ Reached ___ Not Reached. The accommodation agreed upon between the Parish and the parent/guardian/student is as follows:

Signature of Parish Designee: _____ **Date:** _____

Signature of Parent/Guardian/Student (if over 18): _____ **Date:** _____

I affirm that consultation occurred between the Parish and the parent/guardian/student and that the proposed accommodation is acceptable.

Signature of Pastor _____ Date _____