



COVID-19 Mandatory Vaccine and/or Testing Religious Accommodation Request

Team Member Name	
Team Member ID Number	
Location	
Shift	

Complete this form and submit to Employee Relations and Equality at employeerelations@micron.com to request a reasonable accommodation based on your religious belief. Your request for an accommodation must be based upon a sincerely held religious belief, practice or observance that prevents you from receiving a COVID-19 vaccine and/or being tested for COVID-19.

Please answer completely the following questions to describe the religious belief, practice, or observance that is the basis of your accommodation request, and explain how the belief, practice, or observance conflicts with Micron’s mandatory COVID-19 testing and/or vaccination. You may attach additional written documentation to this form in support of your request. Any information provided will be treated as confidential and will not be shared with those who do not have a legitimate need to know; this information will be held in accordance with Micron’s Global Records Retention Policy.

1. Identify your religious belief, practice or observance:

2. Explain how your religious belief, practice or observance conflicts with Micron’s mandatory COVID-19 testing and/or vaccination:

3. State the accommodation that you are seeking to receive (for example, if you may not test, what is the accommodation you are requesting in lieu of testing). Specify if your request is Testing and/or Vaccine; these are two separate requests.

4. What faith / religious group are you a member of that causes you to be unable to submit to Covid-19 testing and/or vaccination?

5. How long have you held the belief or engaged in the practice or observance that forms the basis of your request?

For acknowledgement, I am requesting an accommodation from mandatory COVID-19 testing and/or vaccination as a condition of employment based on my sincerely held religious belief. I will have an opportunity to ask questions and the opportunity to speak with a member of the Employee Relations organization. I am aware that I may be required to provide documentation or additional information in



support of this request to accommodate my religious belief. I acknowledge that if I do not provide all the information requested, Micron will not be able to consider my accommodation request. I understand that my application must be approved before any accommodation may be granted. I further understand that if my request is approved, I will abide by Micron’s COVID-19 safety protocol as well as any other applicable Micron policies.

Team Member Signature:

Date:
