



Camino  
Nuevo  
Charter  
Academy



Camino  
Nuevo  
Charter  
Academy  
Pueblo Nuevo Education  
& Development Group

3435 W. Temple Street  
Los Angeles, CA 90026

Phone: 213-417-3400

Fax: 323-663-3132

[www.caminonuevo.org](http://www.caminonuevo.org)

## Reasonable Accommodation

I am seeking reasonable accommodation for CNCA/PNEDG COVID-19 Vaccine Policy. I seek this accommodation because:

- ☐ I have a disability or serious medical condition
- ☐ I object based on a sincerely held religious belief

Please attach a written statement from a licensed physician identifying a need for an accommodation due to a disability or serious medical condition. This statement must be submitted on the employee's doctor's office letterhead with the doctor's printed name, license number, signature and date the statement is issued. Do not name or identify a diagnosis. The statement must certify that the patient cannot safely be vaccinated because of a disability or a serious medical condition.

Or

Please attach a written statement describing the religious belief or practice that necessitates this request for accommodation.

Employee Name: \_\_\_\_\_ School/Dept: \_\_\_\_\_

Date of request: \_\_\_\_\_

Immediate supervisor: \_\_\_\_\_

Length of time the accommodation is needed: \_\_\_\_\_

Describe any alternate accommodations that might address your needs:

---

---

---

I acknowledge and confirm that the above information is correct. I understand that the accommodation requested above may not be granted but CNCA/PNEDG will attempt to provide a reasonable accommodation that does not create an undue hardship on the organization. I understand that PNEDG/CNCA may need to obtain supporting documentation regarding my religious practice/beliefs/functional limitations to further evaluate my request for an accommodation.

I acknowledge that if my request for exemption is granted, I must submit to weekly COVID-19 testing and present the results timely to PNEG/CNCA until such time as this policy is discontinued.

Employee signature: \_\_\_\_\_ Date: \_\_\_\_\_