CITY OF WILSON				PERSONNEL MANUAL
SUBJECT	NUMBER	EFFECTIVE DATE	SUPERSEDES	
Religious/Medical	****	*****		
Exemption Requests	A-16	2/2023	4/2022	Page 1 of 4
Prepared By: Human Resources		Appro	ved By: Will Aycock	, Greenlight General Manager

1.0 Purpose

The City of Wilson respects the religious beliefs and practices of all employees and will make, on request, an accommodation for such observances when reasonable accommodation is available and does not create an undue hardship on operations.

The City of Wilson also recognizes that health conditions may create situations where employees are unable to effectively perform all of their job tasks or comply with specific organizational programs without reasonable accommodations.

This policy provides a process by which current and/or prospective employees may request exemptions pursuant to regulatory requirements, and participate in an interactive evaluation of available reasonable accommodation that does not create an undue hardship for the organization.

2.0 Scope

All prospective new hires and all current employees are covered under this policy.

3.0 Definitions

3.1 <u>Prospective New Hire:</u> An applicant for a posted position who has received a verbal offer of employment contingent on successful completion of all post offer/preemployment screenings identified by the organization.

4.0 Policy

- 4.1 Prospective new hires or employees seeking exemption from City of Wilson standard work related requirements may request exemption from such requirements based on religious beliefs or health conditions, pursuant to this policy.
- 4.2 Projected employment start date for prospective new hires may need to be revised due to time needed to process and review such requests.
- 4.3 Initial approval of the exemption request is independent of the feasibility of the organization's ability to accommodate such requests.

5.0 Procedures

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5.1 Religious Exemption Accommodation Requests

- 5.1.1 Prospective new hires or employees seeking exemption from standard work related requirements for religious reasons must contact Human Resources and communicate their desire to submit an exemption request.
- 5.1.2 Human Resources will provide the prospective new hire or employee with a "Request for Exemption: Religious Accommodation Request Form." (See Appendix A attached).
- 5.1.3 The form must be completed in its entirety by the prospective new hire or employee and returned to Human Resources.
- 5.1.4 Human Resources staff will review the request and make a determination of approval or denial of the request. A written notice of status will be provided to the prospective new hire or employee.

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- 5.1.5 If the request is accepted, Human Resources will conduct an interactive evaluation of reasonable accommodations with the prospective new hire or employee, as applicable. Discussion with and input from department supervisors to assist in determining potential accommodations will also be part of the process.
- 5.1.6 If reasonable accommodation that does not create undue hardship for the department or organization is agreed upon, the requestor will be notified in writing by HR.
- 5.1.7 Upon approval, prospective new hires will continue with the post offer/preemployment onboarding process. (See policy A-12: New Hire Onboarding)
- 5.1.8 Agreed upon accommodations will be implemented as appropriate.
- 5.1.9 If the exemption request is not approved, and further evaluation of alternative reasonable accommodations is not successful, the offer of employment may be rescinded.

5.2 Medical Exemption Accommodation Requests

- 5.2.1 Prospective new hires or employees seeking exemption from standard work requirements for medical/health related reasons must contact Human Resources and communicate their desire to submit an exemption request.
- 5.2.2 Human Resources will provide the prospective new hire or employee with a "Request for Exemption: Medical Accommodation Request Form." (See Appendix B attached).
- 5.2.3 The form must be completed in its entirety by the prospective new hire or employee and returned to Human Resources.
- 5.2.4 Human Resources staff will review the request and make a determination of approval or denial of the request. Discussion with and input from department supervisors to assist in determining potential accommodations will also be part of the process.
- 5.2.5 The prospective new hire or employee will receive written notification of the approval or denial of the request.
- 5.2.6 If the request is accepted, Human Resources will conduct an interactive evaluation of reasonable accommodations with the prospective new hire or employee, as applicable.
- 5.2.7 If reasonable accommodation that does not create undue hardship for the department or organization is agreed upon, the requestor will be notified in writing by HR.
- 5.2.8 Upon approval, prospective new hires will continue with the post offer/preemployment onboarding process. (See City policy A-12: New Hire Onboarding).
- 5.2.9 Agreed upon accommodations will be implemented as appropriate.
- 5.2.10 If the exemption request is not approved, and further evaluation of alternative reasonable accommodations is not successful: 1) the offer of employment for a prospective new hire may be rescinded; or 2) employment for a current employee may be ended.

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Approved By: Will Aycock, Greenlight General Manager

6.0 Exemption Request Denial Appeal Process

- 6.1 If a request for religious/medical exemption is denied, prospective new hires or employees may request an appeal hearing.
 - 6.1.1 A written request for an appeal must be submitted to Human Resources within five (5) business days of receipt of the request denial. The appeal may be held virtually as schedules and business needs dictate, at the discretion of Human Resources and the hiring manager.
 - 6.1.2 Human Resources will notify the requestor of the scheduled date, time and location of the hearing within seven (7) business days of receipt of the request.
 - 6.1.3 The department head of the applicable department or designee will serve as the hearing officer. The hiring manager and a Human Resources representative will also be present.
 - 6.1.4 Prospective new hires or employees may be represented by an attorney at the hearing. Prior notification to Human Resources of the intent to have legal representation must be provided to Human Resources to ensure the appeal hearing can proceed as scheduled.
 - 6.1.5 The prospective new hire or employee will be able to present documentary evidence of reasons why the exemption denial decision should be reversed.
 - 6.1.6 The hearing officer will review the information and provide a decision in writing to the requestor within ten (10) business days of the hearing.
 - 6.1.7 The decision of the hearing officer will be considered final. Communication of the post hearing status of the prospective new hire or employee will be communicated in writing.

7.0 Administrative Guidelines

- 7.1 Human Resources staff will administrate the Request for Exemption process.
- 7.2 Human Resources will work with department leadership to identify and implement agreed upon accommodations.
- 7.3 All accommodation requirements identified for approved exemptions must be strictly adhered to by the employee. Failure to do so may result in disciplinary action, up to and including termination of employment.

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ACKNOWLEDGEMENT OF POLICY REVIEW

I acknowledge that a copy of City of Wilso was provided to and reviewed with me, as a	n policy A-16: Religious/Medical Exemp oplicable.	tion Requests
Signature		
Printed Name		
Department		
Date		

Reviewer's Signature & Date (if applicable)

Policy A-16: Religious/Medical Exemption Requests APPENDIX A:

Request for Exemption: Religious Accommodation Request Form

Part 1: To be completed	by prospective new hire or employee
Name:	Department:
Requested accommodation vaccination exemption, etc.	n (job change, schedule change, dress/appearance code exception.
	nodation is needed:
Describe the religious belie	of or practice that necessitates this request for accommodation:
Describe any alternate acc	ommodations that might address your needs:
held. I understand that the a company will attempt to prohardship on the company. I	If the City of Wilson's policy on religious accommodation. My religious a result in this request for a religious accommodation, are sincerely accommodation requested above may not be granted but that the evide a reasonable accommodation that does not create an undue understand that the City of Wilson may need to obtain supporting by religious practice and beliefs to further evaluate my request for a
Prospective New Hire/Empl	oyee signature:
Date:	

Part 2: To be completed by Human Resources Describe the requested accommodation: Evaluation of impact (if any): Approved: _____ Denied: _____ If the requested accommodation is denied, what are some alternative accommodations (list in order of preference): 1. _____ Date discussed with prospective new hire/employee: Final accommodation agreed upon: If no agreement on an accommodation, provide an explanation: HR Staff Review: Print Name: _____ Title: _____ Signature: _____ Date____ Director of Human Resources Review: Print Name_____

Signature: _____ Date: ____

Policy A-16: Religious/Medical Exemption Requests

APPENDIX B

Request for Exemption: Medical Accommodation Request Form

To request an exemption from required vaccinations, please complete section 1 below and have your medical provider complete section 2 before returning this form to the human resources department.

Section 1

Name (print):	Date:
Dept.:	Position:
Manager (N/A for prospective new hires):	Work/Cell Phone:
I am requesting a medical exemption from the City on the following vaccination(s):	of Wilson's mandatory vaccination policy for new hires fo
I verify that the information I am submitting to subst vaccination policy is true and accurate to the best of can lead to disciplinary action, up to and including te	tantiate my request for exemption from the City of Wilso my knowledge. I understand that any falsified information
	quired to provide this exemption accommodation if doing workplace or would create an undue hardship for the Cit
Employee Signature:	Date:
Section 2	
Medical Certification for Vaccination Exemption	
Employee Name:	
Dear Medical Provider,	
The City of Wilson requires vaccination against COVIL	

named above is seeking an exemption to this policy due to medical contraindications.

Please complete this form to assist the City of Wilson in evaluating options for this employee.

The person named above should not receive the [in	nsert disease name] vaccine due to:
This exemption should be: □ Temporary, expiring on:/, or whee □ Permanent	:n
I certify the above information to be true and accurate vaccination for the above-named individual.	e, and request exemption from the [insert disease r
Medical Provider Name (print):	
Medical Provide Signature:	Date:
Practice Name & Address:	Provider Phone:
HR USE ONLY Date of initial request:// Date of Accommodation request: Approved/_/ Describe specific accommodation details:	certification received://
☐ Denied/_/ Describe why accommodation is denied:	
HR Staff Reviewer Name (Printed):	Title:
Signature:	
Director of Human Resources Review:	
Print Name:	
Signature:	