



PUBLIC AFFAIRS AND
RELIGIOUS LIBERTY
Seventh-day Adventist Church
SOUTHERN UNION CONFERENCE

Sabbath Accommodation Report Form ***Southern Union Conference of Seventh-day Adventist***

Church Member Information

Date:

First Name		Initial	Last Name	
Address				
City		State	Zip	
Home Phone	Cell Phone	Best time to call: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri		
Email Address			Name of Spouse	
Is your primary language English? <input type="checkbox"/> Yes <input type="checkbox"/> No If English is not your primary language do you need a translator? <input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Male <input type="checkbox"/> Female	
Conference (check one): <input type="checkbox"/> Carolina <input type="checkbox"/> Florida <input type="checkbox"/> Georgia-Cumberland <input type="checkbox"/> Gulf States <input type="checkbox"/> Kentucky-Tennessee <input type="checkbox"/> South Atlantic <input type="checkbox"/> South Central <input type="checkbox"/> Southeastern				
Church		Name of Pastor		

Employer Information

Company Name		Type of business	
Address			
City		State	Zip
HR Director		Phone	
Immediate Supervisor		Fax	
Who has the power to hire and fire:			
How many people in your department?		Number of employees in company.	
Total number of years with company.		What is your job title?	

Briefly describe what you do:	
Is overtime <input type="checkbox"/> Mandatory <input type="checkbox"/> Bid Out <input type="checkbox"/> Voluntary	Is seniority strictly followed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you bid on assignments? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you bid your days off? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you work full-time? Yes No Briefly explain policies governing shifts and days off:	
Have you been reprimanded for missing Sabbath work? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever worked on Sabbath? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a formal grievance procedure? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have any accommodations been suggested? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a labor union involved? Yes No Briefly describe any accommodations you have been offered (indicate who has suggested them).	

Submit form

Instructions for returning document

•Email the form to **religiousliberty@southernunion.com** If you incur any problems feel free to **save the form to your computer under a new name** and **upload it as an attachment** then **send it back to us at the email stated above.**

•Please **DO NOT** complete form **on your phone or any other electronic device** besides a computer.

•Our **Associate Director Kevin James**, will be in contact with you **within 24 hours, Monday-Thursday between 8am & 5:30 pm** upon receipt of the form. If you have any further questions or concerns feel free to contact me at **770-408-2176**, I am more than willing to assist you in this process.

If your issue is time sensitive, please call our office immediately at: 770-408-1800.
Office Hours: Monday-Thursday 8:00 a.m. to 5:30 p.m. Eastern Time (Closed on Friday)

ReligiousLiberty@southernunion.com