

RELIGIOUS ACCOMMODATION REQUEST FORM

Applicant/Cast Member Name:	
Date of Request:	
Mailing Address:	
Phone Number where you can be reached:	
IF YOU ARE A CURRENT CAST MEMBER, PLEASE COMPLETE THE FOLLOWING:	
Perner/Candidate:	
Job Title:	
Work Location:	
Shift Times:	Regular Days Off:
Work Phone:	
Leader Name:	
Reason for Religious Accommodation	
Suggested Religious Accommodation	

Please email completed form to DX.RandA@disney.com or fax at 407.938.6587.

Applicant/Cast Member Signature