

## VIRGINIA DEPARTMENT OF CORRECTIONS

## Religious Item/Holy Day Observance Request

In order to request a religious item or holy day observance, you must provide the below information. This form must be complete, as well documented as possible, and include any relevant supporting documentation, you want considered with this request. You should attach additional pages as needed to support your request. A separate form for each item/holy day requested is required.

Name:	DOC Number:
Facility:	
Request (Select One):	☐ Holy Day ☐ Religious Item
<b>Request:</b> Name of Item/Holy Day Request: Statement of Need: (specify to	uested:
	y: (Please provide a physical description of the item such as size, materials, removable pieces, attach a photo, if available) or (Provide observance dates and any required accommodations
	W: (This part must be completed and signed by the Facility Unit Head or designee) rting documentation to: Faith Review Committee, c/o Operations Support Manager, P. O. Box 26963, Richmond, Virginia 23261-6963
	m/holy day and recommend approval.
☐ I have researched this ite	m/holy day and I recommend disapproval based on the following security concerns:
I have researched this iter levels but not others, etc.)	m/holy day and recommend the following restrictions (i.e. is this item appropriate for some security
-	
	Facility Unit Head Signature
<b>Operations Support Man</b>	ager Review:
☐ This item/holy day observ	vance was reviewed by the committee on
Decision of the Committee: _	
	Signature – Operations Support Manager
	<b>Decision:</b> Approved Disapproved Approved as Amended



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