

**MAINE DEPARTMENT OF CORRECTIONS**  
**REQUEST FOR RELIGIOUS ACCOMMODATION**

To request a religious accommodation, submit the completed form to the facility Chaplain, or other designated staff. Supplemental materials and additional pages may be attached. Please do not send originals of supplemental materials as the Department will not photocopy or return materials. Because of the necessary level of review, the process may require up to 120 days for completion.

Please check as applicable and complete the appropriate section(s) below:

- Request for New Religion: Complete Sections 1, 2, 3 & 4**
- Request for Personal Religious Item(s): Complete Section 2**
- Request for Group Religious Item(s): Complete Section 3**
- Request for Religious Activity(s): Complete Section 4**

I have read and understand Department Policy 24.3, Religious Services. My religious beliefs and practices, which result in this request for a religious accommodation, are sincerely held. I understand that the accommodation requested may be approved, approved in part/denied in part, or denied. I understand that the Maine Department of Corrections may need to obtain supporting documentation regarding my religious practice and beliefs to further evaluate my request for a religious accommodation.

\_\_\_\_\_  
Resident Name (Printed)

\_\_\_\_\_  
MDOC #

\_\_\_\_\_  
Facility

\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chaplain, or other designated staff, Name (Printed)

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
Chaplain, or other designated staff, Signature

**MAINE DEPARTMENT OF CORRECTIONS  
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**Section 1: Request to Allow a New Religion to be Practiced Within the Department's Adult Facilities**

1. Name of the religion: \_\_\_\_\_

2. Number of other residents who are anticipated to practice this religion, if allowed: \_\_\_\_\_

3. Major beliefs of this religion: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. The name of the primary religious text(s) of this religion: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. The nearest municipality and state in which this religion is practiced and the name of the group or organization practicing this religion: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Section 2: Request for Personal Religious Item(s) (if more than four items requested, attach additional pages with this same format).**

1. Name of religion: \_\_\_\_\_

2. Personal religious item(s) requested.

a. Item requested \_\_\_\_\_

Why is this religious item necessary to a religious belief or practice or why is the item desired: \_\_\_\_\_

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Sources from which this item can be acquired: \_\_\_\_\_

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b. Item requested \_\_\_\_\_

Why is this religious item necessary to a religious belief or practice or why is the item desired: \_\_\_\_\_

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Sources from which this item can be acquired: \_\_\_\_\_

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c. Item requested: \_\_\_\_\_

Why is this religious item necessary to a religious belief or practice or why is the item desired: \_\_\_\_\_

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Sources from which this item can be acquired: \_\_\_\_\_

d. Item requested: \_\_\_\_\_

Why is this religious item necessary to a religious belief or practice or why is the item desired: \_\_\_\_\_

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Sources from which this item can be acquired: \_\_\_\_\_

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**Section 3: Request for Group Religious Item(s) (if more than four items requested, attach additional pages with this same format).**

1. Name of religion: \_\_\_\_\_

2. Group religious item(s) requested.

a. Item requested: \_\_\_\_\_

Why is this religious item necessary to a religious belief or practice or why is the item desired: \_\_\_\_\_

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Sources from which this item can be acquired: \_\_\_\_\_

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b. Item requested: \_\_\_\_\_

Why is this religious item necessary to a religious belief or practice or why is the item desired: \_\_\_\_\_

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Sources from which this item can be acquired: \_\_\_\_\_

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c. Item requested: \_\_\_\_\_

Why is this religious item necessary to a religious belief or practice or why is the item desired: \_\_\_\_\_

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Sources from which this item can be acquired: \_\_\_\_\_

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d. Item requested: \_\_\_\_\_

Why is this religious item necessary to a religious belief or practice or why is the item desired: \_\_\_\_\_

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Sources from which this item can be acquired: \_\_\_\_\_

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**Section 4: Request for Religious Activity(s)**

1. Name of the religion: \_\_\_\_\_

2. Individual activities (e.g., fasting on certain days, praying a certain number of times per day or week, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Group activities (e.g., group religious/worship service on a certain day of the week, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Religious Holy Days (include rituals, if any): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Selected religious feast (one only per calendar year) (include date and any special food item):

\_\_\_\_\_

\_\_\_\_\_

6. Religious dietary practices (e.g., not allowed to eat pork, etc.): \_\_\_\_\_

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\_\_\_\_\_

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**Section 5: Recommendation of the Department Faith Review Committee:**

Approve in whole     Deny in whole     Approve in part/Deny in part (specify) \_\_\_\_\_

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\_\_\_\_\_  
Printed Name of the Chair, or designee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the Chair, or designee

Decision of Commissioner, or designee:

Approved in whole     Denied in whole     Approved in part/Denied in part (specify)

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\_\_\_\_\_  
Printed Name of Commissioner, or designee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Commissioner, or designee