



## Charter & Independent School Supplemental

**Applicant Statement & Signature:** This application, loss information and ACORD applications are understood to be an inducement to the issuance of a policy of insurance by Company. The undersigned hereby

A. Authorizes Company to obtain information necessary for evaluation in determining acceptability including, but not limited to, credit reports and physical inspections.

B. Warrants that all answers to questions are true and correct to the best of the applicants belief and knowledge

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

This application **requires** the following attachments:

1. Completed ACORD applications
2. Most recent financial statement
3. Four (4) years hard copy loss runs including current policy term for all lines of coverage desired
4. Charter Schools only- Copy of Charter
5. Supplemental Automobile Questionnaire – For Private Passenger Type (PPT) vehicles

### GENERAL INFORMATION

Legal name to be shown as First Named Insured on policy:

DBA Name:

Email Address

Website Address

School Type

Charter School  Independent/Private School  Montessori School

Is Your School Accredited?  Yes, By Whom? \_\_\_\_\_  No

Date School was Founded

Grades Offered

Current Student Enrollment

Prior Year

Second Prior Year

Describe the Administrators / Principals Background & Qualifications

Do you plan any renovations or new construction in the next 12 months?

Yes  No

If yes, please explain:

Does your school participate in Standardized Testing?

Yes  No

Does your school have a Preschool or Childcare Program that is separately licensed?

Yes  No

**If yes, please complete and submit Supplemental Childcare Questionnaire.**

Do any of your students attend your school because they have been removed from other schools due to violent and/or Criminal Behavior?  Yes How Many? \_\_\_\_\_  No

**If yes, please explain the goals and nature of your school. Attach a separate sheet of paper if necessary**

Do you have any *fund raising activities* that require a permit or license from local authorities, invite the general public onto your premises OR include serving or sale of alcohol?

Yes  No

If yes, provide complete details. Attach separate sheet if necessary.

Will your school have a budget deficit this year?

Yes  No

If Yes, what is the amount of the deficit and how do you plan to fund the deficit?

Did your school have a fund deficit last year?

Yes  No

**GENERAL LIABILITY EXPOSURE INFORMATION**

**Which of the following best describes your school Curriculum / Instructional focus? Select ONE:**

- College Prep  
  Direct Instruction  
  Core Knowledge  
  Science/Math Prep  
  Thematic Instruction  
  Back to Basics  
 School to Work  
  Arts  
  Constructivist  
  Bilingual/Foreign Language  
  Virtual/Cyber/Online  
  Home/Independent Study  
 GED/HS Completion  
  Montessori  
  Expeditionary Learning  
  Waldorf  
  International Baccalaureate

Do ANY of the following describe what type school you are? **Select ONE:**  Yes    No

- Boarding School                       Hospital Based School                       Military School  
 Vocational School                       College / University                       Summer School only operations

Is your school secure against unauthorized visitors?  Yes    No  
 By what means?

If security measures include security guards, be sure to advise complete details including when & why they are used and whether or not they carry firearms.

Are metal detectors utilized?  Yes    No

Does your school have a written safety program?  Yes    No  
 If No, why Not?

Does your school have custodial staff responsible for general maintenance & Safety inspections?  Yes    No  
 If yes, how often are safety inspections of the premises done?  
 If safety inspections are **not** done by custodial employees, please advise who they are done by and how often.

Do you require COI?  Yes    No      What limit is required? \$\_\_\_\_\_

Are Fire Drills conducted on a regular basis?  Yes    No  
 How often?

Can teachers be contacted in their classroom in case of a school emergency?  Yes    No  
 By what means?

Does your school have a written detailed emergency response plan?  Yes    No  
 If No, why not?

Do you have any operations other than school operations?  Yes    No  
 If yes, please describe

Do you lease or rent your school facilities to outside entities?  Yes    No  
 Anticipated annual receipts \$\_\_\_\_\_

If yes, do you require certificate of insurance naming you as additional insured?  Yes    No

Do you employ or contract any medical staff such as school nurse?  Yes    No  
 If yes, How Many? What Type? And Description of services offered:

Do you contract any employment services with outside firms such as cafeteria, busing, security, maintenance or landscaping?  Yes    No  
 If yes, do you obtain proof of insurance?  Yes    No

Advise what limit of liability you require these contracted personnel to carry

Do you have a written policy for dispensing medication to students?  Yes    No

Does your school have a playground?  Yes    No  
 If yes, does the playground comply with ALL standards as set forth by the Consumer Product Safety Commission's *Handbook for Public Playground Safety*?  Yes    No  
 If no, please explain in detail.

Does your school have a cafeteria where food is prepared?  Yes    No  
 If yes, Does the cafeteria contain a deep fat fryer?  Yes    No  
 Describe fire protection in cafeteria:

Does your school offer any adult education courses?  Yes    No  
 If yes, advise course type, length and # of students

Does your school have a swimming pool?  Yes  No

**If yes, complete & submit Supplemental Swimming Questionnaire**

Does your school take any fieldtrips?  Yes  No

**If yes, complete & submit Supplemental Travel Questionnaire**

Does your school offer ANY of the following courses?

Science Lab  Yes  No

Woodworking  Yes  No

Driver's Education  Yes  No

Auto Repair  Yes  No

**If yes, complete & submit Appropriate Supplemental Course Questionnaire**

**PHYSICAL / SEXUAL ABUSE EXPOSURE INFORMATION**

**LIMITS DESIRED**

**Abuse Liability Limit \$ \_\_\_\_\_ Aggregate Limit \$ \_\_\_\_\_**

Are criminal background checks and fingerprint screening performed on all Staff and Subcontractors that come in contact with students?  Yes  No

If no, explain in detail

Are criminal background checks performed on ALL other staff? i.e. Custodians  Yes  No

If no, explain in detail

Are references on all school employee applications checked and verified?  Yes  No

If No, explain why not

Does the school use any volunteers that are NOT parents of a student attending the school?  Yes  No

If yes, are criminal background checks & fingerprint screening performed on them?  Yes  No

If no, explain why and other controls in place

Is corporal punishment legal in the state where the school is located?  Yes  No

Does the school allow corporal punishment?  Yes  No

If yes, attach a copy of the schools corporal punishment policy.

Does the school have a written policy dealing with bullying & hazing?  Yes  No

If no, please explain why and other controls in place

Do all students and/or parents/legal guardians receive a written copy of school rules and expectations for behavior?  Yes  No

Is a signature acknowledging receipt required?  Yes  No

If no is answer to either of the above, explain why in detail:

Has your school ever had an incident that resulted in an allegation of physical or sexual abuse?  Yes  No

If yes, provide complete details on separate sheet of paper and attach.

**PROFESSIONAL LIABILITY EXPOSURES**

**LIMITS DESIRED**

**Each ELL Wrongful Act Limit \$ \_\_\_\_\_ Aggregate Limit \$ \_\_\_\_\_**

**Deductible \$ \_\_\_\_\_ Note the program contemplates a deductible of \$5000**

**Retro Date \_\_\_\_\_**

**EDUCATOR'S LIABILITY EXPOSURES**

Does any course require professional licensing of any instructor other than a license to teach?  Yes  No

If yes, please provide complete details

Does your school provide special education programs and services to special needs students?  Yes  No

If yes, provide complete details regarding types of students and accommodations made.

Attach a separate sheet if necessary.

Are special education services contracted out? If Yes, provide copy of contract  Yes  No

Are all instructors required to follow uniform written procedures regarding retention or promotion of students into next grade level? If no, explain in detail.  Yes  No

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**EMPLOYMENT PRACTICES LIABILITY EXPOSURES**

Indicate below the number of full time and part time employee you have:

FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_ INDEPENDENT CONTRACTORS \_\_\_\_\_

*\*Include the number of owners, partners, leased workers, temporary or seasonal workers in the number of full and part time*

Have any of your staff resigned, retired or been terminated (with or without cause) within the last 36 months?

 Yes How Many? \_\_\_\_\_  No

Do you have a human resources or personnel department?

 Yes  No

If not, how does your school handle this function?

Do you have written policies or procedures that address each of the following human resource functions?

Interviewing & Hiring	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Salary Administration	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Qualifications for Tenure	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Discipline	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Discharge or Termination	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Performance Evaluations	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Are all of the above policies and procedures reviewed and approved by outside council with expertise in employment law?

 Yes  No

Do you require all job applicants to complete a written employment application that questions criminal record?

 Yes  No

If yes, does it contain any questions referencing race, color, natural origin, age, religion, marital status, disability or health problems?

 Yes  No

Does your employment application include an employment-at-will statement or do you otherwise obtain a signed employment-at-will statement? If no, please explain why

 Yes  No

Do you provide an employee orientation for all new employees?

 Yes  No

If not, explain why

Do you have an employee handbook that is routinely distributed to all employees including new hires?

 Yes  No

If not, explain why

Do you have written anti-discrimination policies &amp; procedures regarding the selection of employees for hiring, promotion, layoff, tenure and other employment areas?

 Yes  No

Do you have written anti-sexual harassment policies and procedures?

 Yes  No

If either of the above are answered no, please explain how you sensitize employees on issues of harassment and discrimination?

Do you offer employee out-placement services which assist terminated or laid-off employees in finding other jobs?

 Yes  No

Do you conduct exit interviews? If yes, what do you do with the information obtained?

 Yes  No

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**EMPLOYEE BENEFITS LIABILITY EXPOSURES**Does your school provide any of the following benefits to employees? **Select all that apply:** Yes  No

<input type="checkbox"/> Health Insurance	<input type="checkbox"/> Life Insurance	<input type="checkbox"/> Disability Insurance
<input type="checkbox"/> Pension	<input type="checkbox"/> 401K	<input type="checkbox"/> Stock Purchase

Are permanent records maintained of offers to your employees to participate in employee benefit programs?

 Yes  No

Are such records signed by the employee in ALL instances?

 Yes  No

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**DIRECTORS AND OFFICERS WRONGFUL ACTS EXPOSURES**

Advise the number of Directors, Officers, Board Members and Trustees you have \_\_\_\_\_

Does your school promote, sponsor or provide any type of insurance? If yes, provide details.

 Yes  No

Does your school provide any certification or accreditation activities? If yes, provide details.

 Yes  No

Does your school publish any materials other than promotional brochures, student yearbook or school newspaper?

 Yes  No

If yes, provide details

Does your school conduct any collective bargaining activities? If yes, provide details.  Yes  No

Does your school formulate any type of peer review group or committee for assessing the qualifications or performance of others? If yes, provide details.  Yes  No

Does your school take any disciplinary actions or recommend any disciplinary actions as a result of any peer review? If yes, provide details.  Yes  No

### ATHLETIC PARTICIPANT / SPORTS EXPOSURES

Does your school offer ANY of the following as an *organized instruction, intramural OR interscholastic* Sports program? **Select ALL that apply:**  Football  Ice Hockey  Wrestling  Snow Boarding  Scuba Diving  Rock Climbing/Rapelling  High Element Ropes Course  Firearms or Archery  Skiing  Platform or Springboard Diving  Bungee Jumping  Para-sailing  Yes  No

Does your school offer a gymnastic program that incorporates ANY of the following equipment?  Yes  No

**Select all that apply:**

Balance Beams  Balance Benches  Bar Boxes  Springboards  Planks  Horizontal or Parallel Bars  Pommel or Vaulting Horses

Does your school have a cheerleading squad?  Yes  No

If yes, do the cheerleaders do ANY tosses, mounts, pyramids or jumps?  Yes  No

Does the cheerleading squad participate in any cheerleading competitions?  Yes  No

Does your school participate in competitive equestrian activities?  Yes  No

Do you have a trampoline on your school premise?  Yes  No

**Note that bodily injury or property damage arising out of ANY of the above (5 previous questions) are excluded from the program with the exception of:**

- (1) participation in football, ice hockey or wrestling as part of a physical education class, recess or field day activity
- (2) cheerleading-----other than competition, mounts, pyramids or jumps

**Please SUBMIT proof of coverage for the above excluded sport activities.**

Does your school offer any other type of sports program **not** described above?  Yes  No

If yes, please provide complete details including type, grades that participate, schedule, etc....

If your school offers ANY type of sports program described in the preceding question are the following controls in place?

Instructors trained in physical education  Yes  No

Someone trained in first aid present at all practices/games  Yes  No

Medical exams & signed parental release forms required for all participants  Yes  No

**If no to ANY of the above questions, explain in detail on a separate sheet and attach.**

Is Student Accident Insurance required on all students? **If no, advise why not.**  Yes  No

Is Sports Accident Insurance required on all sports participants? **If no, advise why not.**  Yes  No

**PRIOR CARRIER AND LOSS INFORMATION-ABUSE AND PROFESSIONAL LIABILITY EXPOSURES**

**PRIOR CARRIER INFORMATION-Abuse & Professional Liability Exposures**

Coverage	Carrier & Eff/Exp Dates	Carrier & Eff/Exp Dates	Carrier & Eff/Exp Dates	Carrier & Eff/Exp Dates
	Current Year	1 <sup>st</sup> Prior Year	2 <sup>nd</sup> Prior Year	3 <sup>rd</sup> Prior Year
Abuse or Molestation Liability				
E&O Educators Liability				
Employment Practices Liability				
Employee Benefits Liability				
D&O Directors & Officers				

If any of the above policies were written on a claims made basis please also advise Retro Date \_\_\_\_\_

Have any of these coverages ever been cancelled or non-renewed?  Yes  No  
 If yes, explain fully on a separate sheet.

**PRIOR LOSS INFORMATION-Abuse & Professional Liability Exposures**

Has your school ever been the subject of any incident, claim or lawsuit related to an actual or alleged act, error or omission including:  Yes  No  
 Neglect or Breach of Duty, Misstatement or Misleading Statement, Sexual Harassment, Sexual Molestation, Physical Abuse or Molestation, Wrongful Termination, Discrimination or Harassment

If answer to the preceding question is Yes, please advise the following information for EACH incident, claim or suit:

- (1) Dates of alleged wrongdoing
- (2) Date claim made
- (3) Present incident, claim or suit status
- (4) If concluded, what were the total damages (excluding expenses) paid?
- (5) If closed, what were the total defense expenses paid?
- (6) Amount of demand made or settlement offer made
- (7) Amount of open reserve and claim expenses paid to date
- (8) Detailed description of claim including alleged offenses and your responses
- (9) What actions have you taken to prevent a recurrence?

**BE SURE TO PROVIDE FULL DETAILS BY ATTACHING SEPARATE SHEET FOR EACH INCIDENT, CLAIM OR SUIT**

Has your school ever been the subject of any inquiry, grievance, administrative proceeding or hearing investigation in connection with a Wrongful Employment Related Practice offense?  Yes  No

**If answer to preceding question is Yes**, please advise complete details including dates, description, disposition of inquiry and any awards made regarding each grievance, administrative proceeding or hearing on a separate sheet of paper.

Are you aware of any actual or alleged Wrongful Employment Related Practices that may result in a claim against your school for harassment, discrimination or wrongful termination?  Yes  No  
 If yes, advise details and what you have done to remedy the situation