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| ***ENTITY INFORMATION*** |
| Named Insured:       |
| ***EDUCATIONAL*** |
| **EMPLOYEE** | **FT** | **PT** | **EMPLOYEE** | **FT** | **PT** |
| Administrators |       |       | Licensed Psychologists |       |       |
| Certified Staff |       |       | Nurses |       |       |
| Tutors |       |       | *Of the above how many are ARNPs?* |       |       |
| Licensed Counselors |       |       | Certified Nursing Assistants |       |       |
| Physical Therapists |       |       | Security Guards |       |       |
| Athletic Trainers |       |       | Occupational Therapists |       |       |
| Volunteers |       |       | All Other Employees |       |       |
| Licensed Medical Assistants |       |       |  |  |  |
| ***STUDENTS*** |
| **Educational** *(as reported at fall enrollment)* | **Number of Students** |
| Daycare / Preschool Age 0-3 *(Please complete Daycare supplement)* |       |
| Daycare / Preschool Age 4-5 *(Please complete Daycare supplement)* |       |
| Grades K-6 |       |
| Grades 7-9 |       |
| Grades 10-12 |       |
| Part-Time, Distance, or Online Students |       |
| Colleges: Full-time, On Campus Students |       |
| Colleges: Part-time, On Camps Students |       |
| Colleges: Online Students |       |
| ***ACTIVITIES*** |
| Do you have playground facilities? | [ ]  Yes [ ]  No |
| **If yes,** please list types of equipment:       |
| Number of students participating in interschool athletics grades 6-12:      (Only count a student one time if they participate in multiple sports) |
| Out of the number above, how many participate in cheerleading?       |
| Out of the number above, how many participate in middle school level football?       |
| Out of the number above, how many participate in high school level football?       |
| Do you have a football helmet inventory system in place? | [ ]  Yes [ ]  No |
| Do all athletes participate in baseline testing? | [ ]  Yes [ ]  No |
| Does the entity sponsor a tackle football program? | [ ]  Yes [ ]  No |
| Is the entity compliant with the Zackery Lystedt Law? | [ ]  Yes [ ]  No |
| Do you have a return-to-play protocol system or procedure that requires more than a physician’s release form or note for concussions? | [ ]  Yes [ ]  No |
| Is the applicant a member of the Washington Interscholastic Activities Association? (WIAA) | [ ]  Yes [ ]  No |
| **Extra-Curricular Activities** |
| List and describe annual field trips, athletic programs, extracurricular activities offered, and fundraising events:       |
| Are any of the following activities offered? |  |
| [ ]  Archery | [ ]  Scuba Diving |
| [ ]  Bungee Jumping | [ ]  Snow Skiing |
| [ ]  Climbing (Mountain or Wall) | [ ]  Sky Diving |
| [ ]  Equestrian | [ ]  Water Skiing |
| [ ]  Polo[ ]  Rugby | [ ]  Other (Describe):       |
| **Extra-Curricular Activities Continued:** |
| Is there international travel? | [ ]  Yes [ ]  No |
| **If yes,** *please provide details:*       |
| Is the travel provided or organized by an outside vendor? | [ ]  Yes [ ]  No |
| Are camps operated and directed by insured school? | [ ]  Yes [ ]  No |
| Are camps operated and directed by outside provider?  | [ ]  Yes [ ]  No |
| **If yes**, *who?*       |
| ***ADDITIONAL INFORMATION*** |
| Are there contracted bus operations? | [ ]  Yes [ ]  No |
| Number of buses contracted: |       |
| Are certificates of insurance obtained listing insured school as additional insured? | [ ]  Yes [ ]  No |
| Please indicate limits of liability provided by contracted services: |       |
| Is there any student housing or dormitories owned/leased by the school? (**If yes**, *please complete the Dormitory/Student Housing supplement)* | [ ]  Yes [ ]  No |
| Are meals served? (**If yes**, *please complete the Commercial Cooking supplement)* | [ ]  Yes [ ]  No |
| Do you allow corporal punishment? | [ ]  Yes [ ]  No |
| Does your internet policy include monitoring the online activity of minors? | [ ]  Yes [ ]  No |
| Does your internet policy include educating minors about appropriate online behavior, including interacting with other individuals on social networking websites and in chat rooms, and cyber bullying awareness and response? | [ ]  Yes [ ]  No |

**Completed Supplements Must be Submitted To:**

Byron Riche Phone: (800) 407-2027

Clear Risk Solutions Fax: (509) 754-3406

451 Diamond Dr. briche@chooseclear.com

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