



Public K-12 Schools Sexual Misconduct Supplemental Application for New and Renewal General Liability Policies

Instructions for the educational institution (applicant):

- Please complete all portions of this Supplemental Application completely, truthfully, and accurately.
- To save a partially-completed PDF application and send it someone else, save it as PDF to your hard drive or desktop and attach it to an email, or use the “send” function in Adobe Reader. Be sure to include any attachments.
- Email the completed and signed application with all necessary attachments to your broker.
- If you do not understand a question, please have your broker contact United Educators for clarification.

Submitting Broker

Please complete the information below. Confirm that all application questions are answered and that the application is signed before submitting it to UE.

Submitting Broker Must Complete		
Person to Contact:		
Address 1:		
Address 2:		
City:	State:	Zip:
Phone Number:		
Email:		
License Number:		

Email the completed, signed, and dated application to your underwriter.

Application

Full Legal Name and Address of the Educational Institution

Institution Name:		
Address 1:		
Address 2:		
City:	State:	Zip:

The undersigned is an authorized representative of the **Educational Institution** and all persons or concerns applying for liability coverage. The undersigned declares that all information provided is complete, truthful, and accurate.

Signature: _____ Date: _____

Name: _____

Title: _____

Educational institution: _____

The signing and submission of this application does not bind United Educators to issue, or the **Educational Institution** to purchase, any specific policy or coverage. The information provided in this application is for underwriting purposes only, and does not constitute notice to United Educators of a claim or potential claim under any policy.

Questions

1. Does the educational institution have written policy language addressing sexual abuse of minors by teachers, staff, and volunteers affiliated with the institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Does the policy require reporting to the educational institution of sexual abuse of a minor by teachers, staff, and volunteers affiliated with the institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Does the policy require reporting to law enforcement, child protective services, or similar agency of sexual abuse of a minor by teachers, staff, and volunteers affiliated with the institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Does the educational institution train on the reporting obligations contained in its policy protecting minors from sexual abuse by teachers, staff, and volunteers affiliated with the institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Does the educational institution investigate every report of suspected sexual abuse of a minor by teachers, staff, and volunteers affiliated with the institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Does the educational institution have a dispensary, clinic, infirmary, student health center, athletic facility, or similar facility maintained by the institution principally for use by its students?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Does the educational institution have written policy language addressing sexual abuse of minors that applies to medical personnel working at the dispensary, clinic, infirmary, student health center, athletic facility, or similar facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Have you provided to the educational institution's Head of School, Head of Student Affairs/Life, and the Board Chair a copy of United Educators publication, " Safeguarding Schools From Sexual Predators: What Public and Charter School Leaders Should Ask "?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:	

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