Request for Student Professional Liability Coverage

The University's liability insurance underwriter provides coverage for Purdue student professionals who are enrolled in supervised University programs. Coverage is outlined as follows from the policy and the price is \$13.00 per student per year:

- 1) Arising out of rendering or failure to render any Medical Services at a dispensary, infirmary, clinic, athletic facility, or similar facility maintained by the Included Entity principally for us by the Included Entity's employees or students;
- 2) Against an Associated Medical Facility and an Insured as a result of injury caused by a student intern while participating in any supervised practicum, field work experience, clinical training, or internship program in fulfillment of course requirements in an Allied Health Program; or
- 3) Arising out of rendering or failure to render any Medical Services at the Educational Organization's (i) Audiology and Speech Language Center, or (ii) Psychology Treatment and Research Clinics, which are open to the public;...

The definition of Insured in the policy includes the following:

...at the option of the Educational Organization...student of an Included Entity while serving in a supervised internship program, in satisfaction of course requirements or while acting at the direction of or performing services for or on behalf of the Educational Organization; but only while acting within the scope of their duties or obligations in their respective capacities as described above:...

Not only does it include coverage for students in our medical professional programs, but also those in other non-medical, supervised internship/practicum programs taken to satisfy course or degree requirements.

To request coverage for student professionals:

- A "Request for Student Professional Liability Coverage" <u>RM17</u> must be completed
- Forward the form to Lisa Fortner in the Risk Management Office at lyfortne@purdue.edu or fax to her attention at 765-496-1338.
- Risk Management must receive the request form no later than 30 days after the student begins his/her internship.
- Your cooperation helps ensure that claims do not occur before coverage is in place.
- An ID card evidencing coverage will be provided upon receipt of the <u>RM17</u>.

If you have any questions about this coverage, please contact Dann VanHoosier at 765-494-1690 or by email at djvanhoosier@purdue.edu.