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| **Educational institution name:** |       |

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| **Law Enforcement – Security Guards**  |

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| 1. Indicate the number of security officers that are:
 |
|  |  | # of Officers/Guards | Payroll/Expenditure |
| Full Time | Part Time |
|  | Employed – Armed |       |       | $      |
|  | Employed – Unarmed |       |       | $      |
|  | Contracted – Armed |       |       | $      |
|  | Contracted – Unarmed |       |       | $      |
|  | School Resource Officers |       |       |  |
| 1. Do officers and security guards have arrest authority?
 | Yes [ ]  | No [ ]  |
| 1. Is a K-9 unit used by officers or security guards?
 | Yes [ ]  | No [ ]  |
| 1. Are any of the security officers mounted on horseback?
 | Yes [ ]  | No [ ]  |
| 1. Does a mutual aid agreement exist between the institution and municipal police?
 | Yes [ ]  | No [ ]  |
| 1. Identify the frequency of the following for security officers:
 |
|  |  | New Hires | Annually |
|  | Criminal Background Checks | [ ]  | [ ]  |
|  | Psychological Review | [ ]  | [ ]  |
|  | Weapon Training | [ ]  | [ ]  |
|  | Weapon Recertification | [ ]  | [ ]  |
|  | Drug Testing | [ ]  | [ ]  |
|  | CPR Training | [ ]  | [ ]  |
|  | Active Threat Response Training | [ ]  | [ ]  |
| 1. Is your security department accredited by the International Association of Campus Law Enforcement Administration (IACLEA)?
 | Yes [ ]  | No [ ]  |
| 1. Does the educational institution use outside security contractors? (If ‘yes” answer a.-g.)
 | Yes [ ]  | No [ ]  |
| 1. Is there a written indemnification agreement in favor of the educational institution?
 | Yes [ ]  | No [ ]  |
| 1. Does the educational institution required that it be named as an additional insured on the contractor’s law enforcement/police professional and general liability policies?
 | Yes [ ]  | No [ ]  |
| 1. Does the security contractor’s general liability policy contain an affirmative grant of sexual misconduct liability coverage at limits equal to the policy limit?
 | Yes [ ]  | No [ ]  |
| 1. Are all of the security contractor’s liability insurance policies issued by an insurance company that has an A.M. Best rating of A- or better?
 | Yes [ ]  | No [ ]  |
| 1. Maintain a certificate of insurance of the security contractor’s general, professional, and excess liability policies on file prior to the contract inception?
 | Yes [ ]  | No [ ]  |
| 1. Do you require and maintain evidence of workers compensation insurance?
 | Yes [ ]  | No [ ]  |
| 1. Provide limits for the security contractors liability policies:
 |
|  | General liability: | $      |
|  | Professional liability  | $      |
|  | Excess liability: | $      |

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| This supplemental application becomes part of your primary application and must be signed and dated.Coverage cannot be bound until the Company approves your completed application |

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| --- | --- | --- |
| Signature |  | Date |