



**Florida Atlantic University College of Medicine Self-Insurance Program
Community Service Activity Approval
for Employees and Faculty**

The Florida Atlantic University College of Medicine Self-Insurance Program ("FAUCOMSIP") provides professional liability protection in the amount of \$250,000, per occurrence, for pre-approved community service activities involving the delivery of professional health care services. This protection is offered when such activity is NOT considered within course and scope of requester's university employment.

Approvals required:

COM Personnel:

Department Chair, College of Medicine
Dean, College of Medicine
FAUCOMSIP Director

CON Personnel:

Dean, College of Nursing
FAUCOMSIP Council Chair
FAUCOMSIP Director

SHS Personnel:

Director, Student Health Services
FAUCOMSIP Council Chair
FAUCOMSIP Director

CPS Personnel:

Director, Counseling and Psychological Services
FAUCOMSIP Council Chair
FAUCOMSIP Director

COE School Nurses:

Dean, College of Education
FAUCOMSIP Council Chair
FAUCOMSIP Director

Questions or forms pending only the SIP Director's signature should be directed to FAUCOMSIP, ATTN: Insurance Services, ph. 352-273-7006, Fax 352-273-5424, Email: fauisosip@mail.ufl.edu

Date of Request: _____

Requester: _____

Department: _____

Point of Contact: _____

(Name, title, phone and/or email address)

I. Entity Supported

Name: _____

Address: _____

II. Start Date of Activity: _____

End Date of Activity: _____

Location of Activity: _____

III. Description of activity:

APPROVAL AUTHORITY

Approved - Department Chair, College of Medicine (if applicable) _____ Date

Approved - Dean _____ Date

Approved - FAUCOMSIP Council Chair _____ Date

Approved - Director, FAUCOMSIP _____ Date