Refer questions to:
System Office of Risk Services
Phone: (907) 786-6119
Fax: (907) 786-1412

UNIVERSITY of ALASKA
Many Traditions One Alaska

1815 Bragaw St., Suite 209
Anchorage, AK 99508-3438
www.alaska.edu/risksafety

REQUEST FORM – CERTIFICATE of SELF-INSURANCE

DATE	

What types of coverage are being requested?

- ☐ General Liability
- ☐ Excess Liability ($ 1,000,000 excess of $2,000,000)
- ☐ Auto Liability
- ☐ Workers Compensation
- ☐ Student Professional Liability - Healthcare Specialties
- ☐ Other (Describe):

Student Accident CAN NOT be requested on this form.
For more information see alaska.edu/risksafety/insurance/

The University of Alaska cannot add others as Additional Insureds or provide a Waiver of Subrogation. If the other party is requesting these terms, please refer back to your university Risk Management/ EHS office, Grants office, Purchasing Office, or University Counsel for negotiation.

ATTACH COPY OF CONTRACT (or Agreement, etc) showing request for Certificate of Insurance and the insurance requirements. Certificate will NOT be issued without a contract.

CERTIFICATE ISSUED TO (CERTIFICATE HOLDER)	
Name of corporation / individual requesting certificate	
Address:	
Contact person for Certificate Holder:	
Their title:	
Their phone:	
Their email:	

DESCRIPTION OF UNIVERSITY OPERATIONS RELATED TO THIS CERTIFICATE	
Dates of activity or operation	Number of people involved
Of number of people involved, how many are minors?	What type of transportation is involved?
What is the university doing for or with this individual or corporation? Describe the activity or operation or scope of work.	

YOUR UNIVERSITY CONTACT INFORMATON	
Your university:	☐ SO ☐ UAF ☐ UAA ☐ UAS
Your name:	
Your title:	
Your phone:	
Your email:	
Any notes or comments:	

SUBMIT TO **CAMPUS RISK MANAGEMENT / GRANTS / PURCHASING** FOR REVIEW– **Check appropriate box :**

UAF	☐ Aaron Scheffler, UAF Director EHSRM ☐ Becca Whitman, UAF Risk Manager ☐ UAF Director Grants & Contracts ☐ Other (Please list):	**UAA**	☐ John Huffman, UAA Director EHSRM/EM ☐ Edalee Ahmaogak, UAA Risk Manager ☐ Other (Please list):
UAS	☐ Sylvan Robb, UAS VCAS ☐ Other (Please list):	☐ Other (Please list):	

SYSTEM OFFICE REVIEW

Vanessa Saephan, CIC, Director of Insurance / Risk Management
vtsaephan@alaska.edu