

University of Florida JHMHC Self-Insurance Program Community Service Activity Approval for Employees and Faculty

The University of Florida JHMHC Self-Insurance Program ("UFSIP") provides professional liability protection in the amount of \$500,000 per occurrence <u>for pre-approved community service activities</u> 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. UF Health Center (UF HC) employees must have a 25% or greater FTE allocation in order to be considered.

Approvals required: <u>UF HC employees:</u> <u>Shands HealthCare employees:</u>

Department Chair College Dean or VPHA

UFSIP Director

Hospital CEO

UFSIP Director

Questions or completed forms should be directed to UFSIP, ATTN: Insurance Services, ph. 352-273-7006, Fax: 352-273-5424, Email: ufisosip@mail.ufl.edu

Date of Request:				
Requester:				
Department:				
Point of Contact	·			
	(Name, title, phone and/or ema	il address)		
I. Entity Suppo	orted			
Name:				
Address:				
II. Start Date of Activity:				
110111111		Activity:		
Location of A	Activity:			
III. Descrij	ption of activity:			
*If approval is requ	ired for multiple faculty	/employees please attac	h a roster with this request.	
APPROVAL AUTHORITY				
	If UF:		If other than UF:	
Approved - Chairm	an	Date		
Approved - Dean		Date	Approved - Facility Administrator	Date
Approved - Directo	LIE CID	Date		
Approved - Directo	r, or sir	Date	Approved - Director, UF SIP	Date