

## REQUEST FOR INSURANCE LETTER

If a **school** is requesting an insurance letter, please email or fax this completed request form to your school's Senior Field Counsel. The principal or assistant principal should sign the bottom of this form and attach a copy of the venue agreement, if available.

If a **central office** is requesting an insurance letter, please email the request form (signed by the head of the office) and attach a copy of the venue agreement, if available, to [selfinsuranceletter@schools.nyc.gov](mailto:selfinsuranceletter@schools.nyc.gov) or fax it to 212-374-5959. Please allow at least one week for the letter to be generated.

Charter schools have their own insurance and must contact their business manager for an insurance letter.

<i>Question</i>		<i>Response</i>
1.	Requesting school or DOE office.	
2.	Requesting school/office address, phone, fax number, and <i>email address</i> .	
3.	Contact person at school/office.	
4.	Full name of location of event.	
5.	Event location's address, phone and fax numbers.	
6.	Name and title of person to whom the OLS letter is to be addressed; give address if different from event location.	
7.	Email address of person to whom the OLS letter is to be addressed.	
8.	Type of event (e.g., graduation, camping trip, etc.). Please provide a complete description of event, including all activities.	
9.	Date of event.	
10.	Time of event from beginning to end.	
11.	Number of approximate attendees.	
12.	Cost of event.	
13.	Is venue discounting the normal charge? If yes, what is the normal charge?	<input type="checkbox"/> Yes    \$ <input type="checkbox"/> No

By signing below, you have indicated that this is an official school activity or event (not for use for PA or PTA sponsored events).

\_\_\_\_\_

Print Name

\_\_\_\_\_

Signature of Principal or Assistant Principal, or  
Head of Office

\_\_\_\_\_

Date