



Office of the General Counsel

Risk Management

Certificate of Insurance Request Checklist

Please complete the form provided with the requested information:

- The department requesting the certificate
- The type of certificate being requested (IE- property, professional liability, general liability, auto, umbrella, etc)
- The Event (Title) and purpose, our role (IE- provide health screens, preventative health education lecture, student rotations)
- Date, Time, location (including physical address)
- List any supervising faculty/staff
- Provide a point of contact at the event site
- List by name and rank (IE- D1, D2, Resident) any students participating in the event
- Any specific certificate holder request information (if applicable)
- You are welcomed to attach any flyers, letters of invitations or any other supporting documents you feel would provide details regarding your request.

*The turnaround time on certificate request is typically 1 week.

Please send all request and any supporting documents to Amber DuVentre, Risk Manager at aduventre@mmc.edu. If you have any question email or call Amber at 615-327-6444.

Certificate of Insurance Request Form

Department requesting:

Date:

Time:

Event:

On site contact:

Location with address:

Purpose:

Our role/participation:

Certificate Holder Info (If Applicable):

Type of Certificate (If Applicable):

Supervising Faculty (If Applicable):

Staff attending (If Applicable):

Students attending: