OFF CAMPUS
AGENT LIABILITY REQUEST

Based on the information obtained from the Agent Liability Qualification Statement, I request that consideration be given to extending liability coverage to qualified individuals as agents of the University of Wisconsin (State of Wisconsin) as outlined in the answers supplied for the specific questions noted below. Any additional information I feel would be helpful in your determination as to whether this program and those qualified individuals participating therein appear to meet the intent of Wisconsin Statutes Section 895.46(1) is also enclosed.

1. Specific name of program: ___________________________________________

2. Duration of program: from __________________________ to ________________
   (month, day, year) --(month, day, year)

3. What University office or department supervises the services performed?
   ___________________________________________

4. What is the approximate number of individuals for whom agent liability protection is requested?
   ___________________________

5. Is the student/volunteer for which agent liability protection is being requested paid a salary, wage, or stipend for services performed? ____________

6. Does the outside organization demand that liability coverage be extended to the student/volunteer prior to performing the service? ___________________________
   
   NOTE: If the answer is yes and it is not a system wide agreement having already been approved, then attach a copy of the pertinent provisions of the contract or agreement language so that it, too, may be evaluated.

7. For services or training being performed off the University property, who selects the site/organization? ___________________________
   ______________________________________________________________________

8. Explain what methods are used in the site/organization selection. _____________
   ______________________________________________________________________
   ______________________________________________________________________

9. Name(s) of site/organization selected. ______________________________________
   ______________________________________________________________________
10. Who selects the supervisor at the site/organization to which the student/volunteer is assigned?
__________________________________________________________

11. Once the site/organization and supervisor is selected, does the University:

   Have direct cooperation with the immediate supervisor of the trainee at the site/organization?
       Yes____ No____

   Make sure the site/organization supervisor evaluates our trainees? Yes____ No____

   Evaluates the site/organization to determine participation in the future? Yes____ No____

   Evaluate the trainee while at the site/organization? Yes____ No____

12. Describe the program: ______________________________________________________

   _______________________________________________________________________

13. For the program described above, state clearly the duties and responsibilities of the
   individuals for whom agent liability protection is being requested: _____________

   _______________________________________________________________________

14. Describe the qualifications of the individual to perform the above duties and
   responsibilities: ______________________________________________________

   _______________________________________________________________________

15. Explain the direct and substantial benefits to the University from this particular
   program: _____________________________________________________________

   _______________________________________________________________________

   _______________________________________________________________________

Submitted by:
______________________________________________________________________

Signature  Job Title  Date