



**SCHOOL VIOLENCE
SUPPLEMENTAL APPLICATION**

BY COMPLETING THIS APPLICATION, THE APPLICANT IS APPLYING FOR COVERAGE WITH EITHER **ARGONAUT INSURANCE COMPANY** OR **ARGONAUT GREAT CENTRAL INSURANCE COMPANY**, A LICENSED INSURER.

Entity Name	Date
Completed By	

1. Is there is a formal anti-bullying program in place, staff and student education and training included? Yes No
2. Is there full-time law enforcement for security? Yes No
3. Except for Law Enforcement or x-law enforcement security, are all schools gun-free zones? Yes No
4. Does school staff undergo active shooter response training? Yes No
5. System wide mandatory policy in place for reporting incidents and suspicious activity? Yes No
6. 100% of incidents and suspicious activities reported are investigated by School Administration? Yes No
7. Triggers in place to contact Law Enforcement when incident or suspicious activity calls for it? Yes No
8. Are Violent Response Practice Drills conducted at least annually? Yes No
9. Annual collaboration with law enforcement on School Violence program and controls? Yes No
10. Are Visitor Protocols in place including sign in and badges? Yes No

THIS SUPPLEMENTAL APPLICATION IS INCORPORATED BY REFERENCE INTO THE PRIMARY APPLICATION

APPLICANT'S SIGNATURE	DATE
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