

CALIFORNIA STATE UNIVERSITY, LOS ANGELES

Student Liability Insurance

Date Paid: _____ Amount Paid: _____ Coverage Year: _____

Last Name First Name Middle Name CIN #

Street Address Phone Number

City State Zip Code E-Mail

Medical Professional Liability and Educator's Errors and Omissions Liability Insurance is for students in the nursing/allied health program and in the teaching credential program who are required by third-party institutions (hospitals, K-12 schools) to provide professional liability insurance for participation in affiliation programs.

Please check the University Risk Management website for additional information on covered disciplines, coverage, and obtaining a certificate of liability insurance at:
<http://www.calstatela.edu/univ/ehs/rm.ins.mgt.htm>

This liability insurance is good for one year only beginning on July 1. It must be renewed annually for the duration of your program. As of 07/01/2008, the cost is \$20.00 annually.

Cashier's Office

Student Liability Insurance may also be purchased online.
You must print a copy of the receipt as proof of payment

1. Go to: <https://get.calstatela.edu/>
2. Go to the Guest Menu on the left and click on "Credit Card Payment"