

## EVIDENCE OF PROFESSIONAL LIABILITY COVERAGE

<b>Covered Entity:</b>	University of Washington – School of Nursing
<b>Term:</b>	July 1, 2025 to June 30, 2026
<b>Limits:</b>	Follows state statutory limits, unless higher limits are required by written contract.
<b>Policy Number:</b>	Not applicable; this is a statutorily self-insured program
<b>Form:</b>	Occurrence
<b>Conditions:</b>	Coverage applies worldwide to the negligent acts or omissions of the University of Washington and its employees, students, and agents acting in the course and scope of their University duties pursuant to RCW 28B.20.250 <i>et seq.</i> The term “agent” includes volunteers to authorized University programs.
<b>Contact:</b>	rmcerts@uw.edu, fax (206) 543-3773
<b>Date Issued:</b>	May 7, 2025