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Employment Practices Liability Insurance Short Form Indication Questionnaire

APPLICANT

Name: _____
 Principal Address: _____
 Additional Location Addresses: _____

Operations: _____
 Current EPLI Carrier, limit, premium & retroactive date: _____

EMPLOYEES

Total # at this time: Full Time ___ / Part Time ___ / Union ___ / Seasonal ___ / Temporary ___ / Leased ___
 Total # of Employees: Last Year _____ Year Before _____
 Approximate Total Employee Turnover %: Current Year _____ Last Year _____ Year Before _____
 # of Involuntary Terminations (fired, laid off): Current Year _____ Last Year _____ Year Before _____
 # of Employees by Salary Range: < \$30,000 ___ \$30 - \$50,000 ___ \$50 - 100,000 ___ \$100,000+ ___
 Are any Employees party to an Employment Contract? (if yes, provide details): _____

PRACTICES

Do you have a Human Resources or Personnel Department?..... _____
 Do you have a relationship with Labor Relations Legal Counsel?..... _____
 Are terminations required to be reviewed by your HR Dept, Legal Dept or Outside Counsel?..... _____
 Do you perform exit interviews when an employment relationship is ended?..... _____
 Are your employment policies & procedures periodically reviewed by Labor Relations Counsel?..... _____
 Do you perform regular written performance evaluations for all employees?..... _____
 Do you have a formal orientation program for all newly hired employees?..... _____

POLICIES

Do you use an Employment Application for all job applicants?..... _____
 Does it contain At-Will wording?..... _____
 Have you distributed an Employee Handbook to all employees?..... _____
 Does it contain At-Will Wording? _____ Does it contain Contract Disclaimer wording? _____
 Have you implemented:
 Anti-Discrimination Policy or EEOC Statement?..... _____
 Anti-Harassment Policy?..... _____
 Do you have written Employee Grievance or Complaint Procedures?..... _____

HISTORY

Have you had any acquisitions, facility closings or lay-offs totaling 10% or more in the last 24 months? _____
 Do you foresee making any acquisitions or closing any facilities in the next 24 months?..... _____
 In the past five years, have you been involved in any claim, lawsuit, or administrative action
 or received any charges or demand letters involving employment related allegations?..... _____
 If yes, provide details of allegations, status, legal expenses incurred, settlement or award paid by any party.
 Are you aware of any past or present situations that could result in a claim? _____ If yes, provide details.