

Covers cosmetology, barbering, esthetics, nail, and massage schools, including student clinics serving the public and continuing education academies. Hair salons use CWCO-SUP-SALON; general schools CWCO-SUP-SCH. Complete with ACORD 125. Attach the student enrollment agreement, catalog, and accreditation letter.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME	DBA	FEIN	YEARS IN BUSINESS
SCHOOL ADDRESS	CITY / STATE / ZIP	WEBSITE	

Entity type:
☐ Sole proprietor ☐ Partnership ☐ LLC ☐ Corporation ☐ Franchise / brand affiliate

PRIMARY CONTACT / TITLE	PHONE	EMAIL

STATE BOARD SCHOOL LICENSE NO.	ACCREDITOR / TITLE IV PARTICIPATION

2 OPERATIONS

Programs (check all):
☐ Cosmetology ☐ Barbering ☐ Esthetics / skin care ☐ Nail technology ☐ Massage therapy ☐ Makeup / lashes
☐ Instructor training ☐ Continuing education

Size:
 Students enrolled Students under 18 Instructors Campuses Clinic clients per week
 % revenue from federal aid

REVENUE SOURCE	% OF REVENUE

Revenue sources: tuition (federal aid); tuition (private pay); student clinic services; retail products; kit sales; continuing education.

3 EXPOSURE & RISK QUESTIONS — STUDENT CLINIC & PUBLIC SERVICES

A Michigan beauty school paid \$2.8 million in 2023 to settle claims by about 1,500 students that they were made to clean, do laundry, and restock without pay.

3-1 Do students perform services on paying members of the public?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-2 Is a licensed instructor on the clinic floor supervising every service?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-3 Are chemical services (color, relaxers, peels) given patch tests and consultations?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-4 Are clients asked to sign a release acknowledging services are performed by students?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-5 Are tools disinfected and logged as the state board requires?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-6 Has a client claimed a burn, infection, hair loss, or allergic reaction?	☐ Yes ☐ No
IF YES, EXPLAIN	
3-7 Are advanced services (lasers, microneedling, chemical peels) taught or performed?	☐ Yes ☐ No
IF YES, EXPLAIN	

4 EXPOSURE & RISK QUESTIONS — STUDENTS, AID & COMPLIANCE

An Oklahoma school owner paid \$50,000 to settle claims that students at unapproved schools applied for federal aid using approved schools' codes.

4-1 Are students required to do cleaning, laundry, reception, or retail work? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Are student hours and progress reported to the state board on a written system? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 Has the school had a federal aid program review, audit, or repayment? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Have students complained about job placement rates, refunds, or enrollment promises? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Has a student or employee alleged harassment or discrimination? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Are students under 18 enrolled or high school partnerships offered? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Has the state board or accreditor cited or placed the school on probation? ☐ Yes ☐ No
IF YES, EXPLAIN

5 PAYROLL, SALES & REVENUE

TOTAL ANNUAL PAYROLL (\$, ILLUSTRATIVE)	NUMBER OF EMPLOYEES	INSTRUCTOR PAYROLL (\$)
ANNUAL TUITION REVENUE (\$, ILLUSTRATIVE)	CLINIC SERVICE REVENUE (\$)	RETAIL / KIT SALES (\$)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently-valued loss runs for the last 5 years.

CURRENT CARRIER	LIMIT / DEDUCTIBLE	EXPIRATION DATE

6-1 Has any carrier declined, cancelled, or non-renewed coverage for this business in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

6-2 Has a student or former student sued over tuition, wages, or educational outcomes? ☐ Yes ☐ No
IF YES, EXPLAIN

DATE OF CLAIM	DESCRIPTION	TOTAL INCURRED (\$, ILLUSTRATIVE)	OPEN / CLOSED

6-3 Is the applicant aware of any incident, complaint, or circumstance not yet resulting in a claim that could reasonably give rise to one? ☐ Yes ☐ No
IF YES, EXPLAIN

7 RISK MANAGEMENT

7-1	Is there a written incident procedure for clinic client injuries and reactions?	☐ Yes ☐ No
IF YES, EXPLAIN		
7-2	Are admissions and marketing materials reviewed for accuracy every year?	☐ Yes ☐ No
IF YES, EXPLAIN		
7-3	Is there a written anti-harassment policy with a reporting process for students?	☐ Yes ☐ No
IF YES, EXPLAIN		

8 SIGNATURE & FRAUD WARNING

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental is an intake document prepared by Cory Washington & Co. LLC to support carrier submission; it does not itself provide coverage.

FRAUD NOTICE: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information, or conceals for the purpose of misleading information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. (State-specific fraud warnings apply; see state amendatory notice.)

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)	TITLE	DATE
PRODUCER — CORY WASHINGTON & CO. LLC	PRODUCER SIGNATURE (TYPE FULL NAME)	DATE