

**PROFESSIONAL LIABILITY SUPPLEMENTAL APPLICATION
PART TIME PHYSICIAN/DENTIST CREDIT**

Part I - Physicians/Dentists

The JUA will permit a discount for the following part time physicians and dentists:

- Retired non-practicing physicians or dentists donating time to charitable or non-profit organizations
- Emergency medicine residents moonlighting at rural or small community emergency room departments
- Part time and/or semi-retired physicians or dentists who are working no more than eighty-five hours per month

Part II – Conditions

- A Part Time Physician/Dentist Professional Liability Application must be completed by the applicant every year for the purposes of determining whether the applicant is eligible for this type of coverage.
- The hours reported to the Association for rating purposes are subject to audit, at the Association's discretion.
- No other credits apply concurrent with this rule except for Risk Management Discounts.
- Physicians or dentists who are subject to experience rating surcharges are not eligible for this part time discount.

Part III – Personal Data for Applicant

Name: _____ JUA Policy # _____

Office Address: _____

Professional School Attended: _____

Year of Graduation: _____ Please Designate Professional Degree: _____

Specialty: _____

Name of Employer or Professional Affiliation: _____

Do you have medical malpractice insurance through any other carrier? _____ Yes _____ No

List Hospitals which you currently hold privileges at: _____

Number of Hours worked per month: _____ Nature of Practice: _____

Name and telephone # of individual that SC JUA may contact for audit of records:

I hereby warrant that the information contained in this application is accurate and complete to the best of my knowledge. I understand that this application shall be considered a part of the terms and conditions of my insurance policy with the South Carolina Medical Malpractice Joint Underwriting Association.

Signature of Applicant

Date