

STATE OF MINNESOTA
Department of Human Services
Department of Corrections
Divisions of Licensing

PROOF OF WORKER'S COMPENSATION INSURANCE COVERAGE

Under Minnesota Statutes, section 176.182, the Department of Human Services (DHS) and the Department of Corrections (DOC) are prohibited from issuing or renewing a license until the applicant presents acceptable evidence of compliance with the worker's compensation insurance requirement of section 176.181, subdivision 2.

Under the Minnesota Government Data Practices Act, we must advise you that:

- DHS or DOC may supply this information to the Department of Labor and Industry.
- Failure to supply this information may be a basis to deny the issuance of your license.

Please fill in the following information and return this form along with your application to the Department of Human Services, Licensing Division.

Applicant's Name (Program Name)

Program Street Address

City State Zip Code

Worker's Compensation Coverage Information:
Complete Information Below Unless Exempt by the Department of Labor & Industry

Name of Insurance Company

Worker's Compensation Insurance Policy Number Permit to Self-Insure

Effective Dates of Coverage From: _____ To: _____
Month Day Year Month Day Year

THIS FORM MUST BE SIGNED AND DATED
EVEN IF YOUR LICENSE DOES NOT REQUIRE PROOF OF WORKER'S COMPENSATION

Signature Title Date

For questions regarding Worker's Compensation requirements, contact the Minnesota Department of Labor & Industry at (651) 297-4377 or 1-800-342-5354.