

CSRM Measuring School Risks

Wednesday, January 26, 2023 | 8:00 AM to 5:00 PM | Lunch Included

Location: TASBO 5920 W. William Cannon Dr, Austin, TX 78749

Room: Bluebonnet

In-Person Only

EVENT DESCRIPTION: This is one of the five-part Certified School Risk Managers (CSRM) designation programs for school personnel responsible for the risk management function. Participants will learn to analyze and evaluate school risks, along with the mechanics of forecasting and trending losses to be used in estimating loss projections, determining insurance program retentions, and deductibles.

Topics Covered:

- Introduction and Qualitative Analysis for School Risks
- Qualitative Risk Assessment and Loss Run Analysis
- Quantitative Analysis Tools and Forecasting
- The Risk Analysis Process

FEE: \$250 Member | \$250 Non-Member

EXAM: Optional exam (for CSRM designation) begins at 4:00 PM The CSRM designation is offered by the National Alliance for Insurance Education and Research. Visit <https://www.scic.com/csrm/> for more information about the CSRM.

HOTEL INFORMATION: The hotel nearest the TASBO office is the Hampton Inn Oak Hill, located at 6401 US Hwy 290 West, Austin, Texas 78735 (512-891-7474). Use this number to book a room at the TASBO rate of \$129/night.

CE Hours: 7

CONDITIONS: Meeting room temperatures are difficult to maintain; always bring a sweater or jacket to ensure comfort. Casual attire is acceptable.

About TASBO Events: If you or (someone attending with you) need ADA assistance to participate, please call us at 512.462.1711.

CANCELLATION POLICY: Cancellations are only accepted in writing. Cancellations received seven (7) working days before the event are cancelled in full, those received one (1) to six (6) working days before the event are cancelled at 50 percent, and cancellations are not accepted the day of or after the event. If you do not cancel and/or do not attend, you are still responsible for payment. If TASBO cancels an event, you will be refunded in full.

Register online at [TASBO.org](https://tasbo.org) or return completed form by:

Mail: 5920 W William Cannon Dr, Bldg 1, Ste 200, Austin, TX 78749 **Fax:** 512.462.1782 **Email:** register@tasbo.org (DO NOT email CC info)

Please PRINT clearly.

Name: _____ Title: _____

District/Employer (*do not abbreviate*): _____

Contact Phone: _____ Email: _____

Payment Method: ☐ PO _____ ☐ Check Enclosed ☐ Credit Card

Cardholder Name: _____ Daytime Phone: _____

Card Number: _____ EXP (MM/YY): _____

Billing Address: _____

Cardholder Signature: _____