



CSRM Funding School Risks

Monday, June 17, 2024 | 8:00 AM to 5:00 PM | Lunch Included

Location: Kalahari Resort, Round Rock, TX

This is one of the five-part Certified School Risk Managers (CSRM) designation programs for school personnel responsible for the risk management function. This is one of the five-part Certified School Risk Managers (CSRM) designation program for school personnel responsible for the risk management function.

The primary focus of this course is to introduce and explain the methods that can be used to finance the district's losses. Using general criteria, the risk manager compares and evaluates the various risk financing options and ultimately determines which is best for the school district.

Topics Covered:

- Introduction to Funding School Risks
- Foundations of Funding
- Options for Funding School Risks
- Reserving for School District Risks
- Financial Issues for the School Risk Manager

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/csrn/> for more information about the CSRM.

HOTEL INFORMATION: Information will be released when registration for Summer Solutions opens.

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://www.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: _____