

## **Health Insurance Information Form**

F-1 international students are strongly recommended to secure their own health insurance while enrolled at Westcliff University and while in the United States. Students are required to complete this form and provide a copy of proof of coverage including their policy and an insurance ID card. Please submit the required documents to <a href="intlservices@westcliff.edu">intlservices@westcliff.edu</a>.

## Why is it important to have health insurance?

Medical expenses can be costly especially during a time of medical emergency in the United States. Without having adequate coverage, unexpected medical expenses can create a huge financial burden and negatively impact experiences in the U.S. Insurance providers will financially assist students in covering the cost of different levels of accidents or injuries depending on the insurance plan that is chosen.

## Where can I find affordable health insurance?

There are a variety of health insurance providers and plans that can provide international students with benefits according to their own needs. International students have the option of choosing health insurance plans that is recommended by the school or through other agencies (as listed in this form).

STUDENT CONTACT INFORMATION				
DIODENI CONTACI INFORMATION				
End Maria				
Full Name				
Student ID#	SEVIS No.			
	<del></del>			
Address	City, State, Zip Code			
Phone Number	Email Address			
Filone Number	Eman Address			
EMERGENCY CONTACT INFORMATION				
Full Name				
Phone Number	Relationship			
I none Number	Relationship			



☐ I currently do not have	health insuran	ce plan that will cover my stay in the U.S.  nce that will cover my stay in the U.S., but will opt to ne recommended health insurance options (as below).
☐ I currently do not have	health insura	nce that will cover my stay in the U.S., but will opt to
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r my o m mount		
Insurance Company Name		
Insurance Phone Number		Insurance Policy Number
Insurance Group or Employer N	Number (if appl	icable)
Dates of Coverage (Start date)		(End Date)
Relationship to Policy Holder:	Self [	Spouse Family Employer
Health Insurance Options		
	red up with the	se health insurance providers to offer affordable health
insurance plans for internationa staff members for brochures and		ou would like more information, please ask university
Insurance Provider Pho	one Number	Website
ISO Insurance 800	)-244-1180	https://www.isoa.org/westcliff_university
International Student Insurance 904	-758-4391	http://www.internationalstudentinsurance.com/schools/westcliff-university.php
the importance of purchasing healt	h insurance and	urate. I understand that Westcliff University has emphasized has recommended me to purchase insurance. I also understand red medical cost or loss of health insurance premiums.
Student Signature		Date