



## Health Insurance Verification

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ DOB \_\_\_\_\_

Home Address (Street/P.O. Box) \_\_\_\_\_ Email \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Cell \_\_\_\_\_ Home \_\_\_\_\_

Davis College requires all students taking 6 credits or more, on campus, and/or all students participating in athletic programs through the college to show proof of health insurance covering them in Broome County, New York. This requirement serves as a 'safety net' against unforeseen medical expenses which to pay could interrupt or cancel the academic goals of the student.

**Davis College does not offer a student health insurance plan.**

- International Students must show proof of health insurance coverage and should investigate what is available through their country's Travel Abroad Insurance companies. Premiums for such policies must be paid in full for one full year and be renewed annually for as long as the student is enrolled at Davis College.
- An individual who does not have insurance coverage is not eligible for any hospital patient assistance program.
- **All athletic injuries fall under the student's own health insurance plan. There is no additional coverage by the college.**

I do not need to show proof of Health Insurance coverage because I am currently taking less than 6 credits and will not be participating in campus athletics.

### Verification:

Attached is a copy of my current/valid health insurance card (front and back), which provides coverage for me in Broome County, New York. I understand that any medical treatment not covered by my health insurance provider will be billed to me and will be my own personal financial responsibility.

I opt out of enrolling in any health insurance plan. As of this writing (7/5/17), I understand the government imposes financial consequences for not having insurance coverage and that any medical bills incurred by me are also my own financial responsibility. **Athletes and International Students MAY NOT choose this option.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian must sign if student is under 18 years of age