

## PROOF OF HEALTH INSURANCE

I, \_\_\_\_\_, am enrolled in the following insurance plan for the Fall /Spring semester (circle one/both) of the current academic year:

Insurance Co.: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone No.: \_\_\_\_\_

Policy No.: \_\_\_\_\_

Dates of Coverage: \_\_\_\_\_

### Whom should St Vladimir's Seminary notify in case of emergency?

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

\_\_\_\_\_

Signature

Date

### Please attach ONE of the following:

A copy of your insurance card, OR

Insurance application form, bill for insurance, or other proof of enrollment.

This form and a proof of enrollment must be returned to Gabrielle Russin, the Student Affairs Administrator (Rangos 116, x348), by the first Friday of the semester.

**If you do not submit this form by the deadline, you will not be permitted to attend classes, will have your registration suspended, and will be charged a \$50 late registration fee.** If this and the immunization form are not on file with the Student Affairs Administrator within thirty (30) days after classes begin, you will be administratively withdrawn from the seminary.

Health insurance is a requirement for all students in the State of New York.