

Proof of Health Insurance Form

All students enrolled in the M.D. program of the College of Medicine are eligible to purchase the UCF student health insurance plan. While enrollment in this plan is not mandatory, proof of comparable coverage is required if the M.D. student decides to enroll in another plan. Please see http://hs.ucf.edu/payment for the plan's provisions and benefits. Note: You cannot wait until financial aid disbursements in mid-August to purchase your Health Insurance. All students are required to have proof of health insurance coverage prior to the end of orientation.

If you have comparable coverage, please complete this form and submit it to the College of Medicine's Office of Student Affairs for verification and approval.

Student Name: PID# or last 4 digits of SSN: CERTIFICATION/PROOF OF HEALTH INSURANCE COVERAGE Name of Policy Holder: Health Insurance Company: Health Insurance Company Phone Number: Policy Number: I intend to purchase UCF Student Health Insurance once available. STUDENT SIGNATURE DATE

College of Medicine Office of Student Affairs 6850 Lake Nona Blvd. Orlando, FL 32827-7408 (407) 266-1353 • FAX (407) 266-1389

THE DEADLINE FOR PROOF OF HEALTH INSURANCE IS

JULY 1, 2017