



Insurance Coverage Form

Student: _____

Summer of 20__

The AJY Summer Program requires all participants to have travel health insurance coverage for the duration of the Summer Program. Please discuss this issue with your home campus and mark the appropriate box below:

- My sending institution has arranged a comprehensive insurance policy for me for the duration of my study abroad experience in Europe. *Please attach a copy of your insurance information that details your provider, policy number and your insurance coverage. Please include the name, title and email address of the person who administers this insurance program at your home campus.*
- I have arranged my own travel health insurance which will provide full coverage for me in Europe for the duration of the Summer Program. *Please attach a copy of your insurance information that details your provider, policy number and your insurance coverage.*
- I do not have travel health insurance coverage and would like AJY to arrange it for me. I will pay the cost for the insurance (approx. 120€) upon my arrival in Heidelberg.

I understand that:

1. Chronic and persistent health problems should be attended to before leaving.
2. Prescription medication should be refilled before leaving.
3. Emergency counseling services are readily available in Heidelberg; however, they are harder to provide on short notice. If you are currently in treatment, it might be worth ensuring continuity through virtual appointments.
4. Regardless of the type of insurance coverage I have, I am aware that I may find myself needing quick access to monetary reserves to pay for doctor's fees, hospital stays, medication, etc. until I am reimbursed by my insurance company.

Date: _____

Signature: _____

Please upload your completed form to your portal on Slate.