

Global Learning

Alternate Insurance Petition

Name: _____

K# _____ **Country of Citizenship:** _____

Email Address: _____ **Phone #** _____

All F-1 and J-1 international students must have valid health insurance to attend Kirkwood Community College. Kirkwood automatically bills students for the LowerMark Student Insurance policy at the beginning of each Fall term. If students prefer not to use Lower, international students may choose to have a **pre-approved alternate health insurance policy**. The Global Learning office must **pre-approve** your policy before the charge will be removed from your account. To be approved, you must complete this form and show that your insurance policy meets each of the following criteria. Please attach and highlight on attached documentation that each of these criteria are met.

1. The policy is valid until at least the beginning of the next Fall semester;
2. The medical benefit is at least \$50,000 per illness or injury with a maximum \$25 co-payment and an annual out-of-pocket maximum of \$3,000;
3. The repatriation benefit is at least \$25,000;
4. The medical evacuation benefit is at least \$50,000;
5. The policy pays for pre-existing conditions after 1 year of continuous coverage.

I hereby certify that my alternate insurance policy meets all of the criteria shown above and have attached documentation here illustrating those coverages.

Student Signature _____ **Date:** _____

----- For Office Use Only -----

Approved _____ **Date:** _____

Denied _____ **Date:** _____

International Student Advisor Signature

Date:

Finance Notified Date: _____